

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35375

FILED
May 04, 2010
Secretary of State

Entity Name: BAPTIST MEDICAL CENTER OF THE BEACHES, INC.

Current Principal Place of Business:

1350 13TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

1325 SAN MARCO BLVD.
#902
JACKSONVILLE, FL 32207 US

New Mailing Address:

841 PRUDENTIAL DRIVE
SUITE 1802
JACKSONVILLE, FL 32207 US

FEI Number: 59-2980620 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRANGER, HARVEY
841 PRUDENTIAL DR
SUITE 1802
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP
Name: GREENE, A. HUGH
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: DC
Name: JOHN K. ANDERSON, JR.
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKONVILLE, FL 32207 US

Title: AS
Name: GRANGER, HARVEY
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: DST
Name: BONO, SR, ERNEST P
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: DVC
Name: WAINWRIGHT, WILLIAM R MD
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: D
Name: CHAO, DON
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HARVEY GRANGER

AS

05/04/2010

Electronic Signature of Signing Officer or Director

Date