## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P93000085634

Entity Name: BAPTIST OCCUPATIONAL HEALTH, INC.

FILED Mar 25, 2002 8:00 AM Secretary of State

Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
1325 SAN	/EY GRANGEF MARCO BLVI VILLE, FL 322	D., SUITE 902				
Current Mailing Address:			New Maili	New Mailing Address:		
1325 SAN	/EY GRANGEI MARCO BLVI VILLE, FL 322	D., SUITE 902				
FEI Number:	: 59-3214040	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1325 SAN SUITE 902 JACKSON	VILLE, FL 322	207 US				
	named entity e of Florida.	submits this statement for the p	ourpose of changing i	its registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electror	nic Signature of Registered Ag	ent		Date	
•	-	o satisfy its Intangible Tax filing red g Trust Fund Contribution ( ).	uirement and elects to	do so (X).		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	RAINES, DIANE 1325 SAN MAR	) Delete E CO BLVD., SUITE 902 E, FL 32207 US	Title: Name: Address: City-St-Zip:	DURKIN, CHE 1325 SAN MA	X) Change ( ) Addition RISTOPHER RCO BLVD., SUITE 902 LE, FL 32207 US	
Title: Name: Address: City-St-Zip:	PARRETT, DOI 1325 SAN MAR	) Delete NALD O RCO BLVD., SUITE 902 E, FL 32207 US	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	THOMPSON, C 1325 SAN MAR	) Delete AROL C CO BLVD., SUITE 902 E, FL 32207 US	Title: Name: Address: City-St-Zip:	(	)Change ()Addition	
Title: Name: Address:	JACKSON, REI	) Delete BECCA B RCO BLVD., SUITE 902	Title: Name: Address:	(	) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: REBECCA B. JACKSON ST 03/25/2002

JACKSONVILLE, FL 32207 US

City-St-Zip: