# 2015 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

#### DOCUMENT# N0500007975

Entity Name: BAPTIST MEDICAL CENTER OF CLAY, INC.

#### **Current Principal Place of Business:**

841 PRUDENTIAL DRIVE SUITE 1802 JACKSONVILLE, FL 32207

#### **Current Mailing Address:**

841 PRUDENTIAL DRIVE SUITE 1802 JACKSONVILLE, FL 32207

#### FEI Number: 75-3198121

#### Name and Address of Current Registered Agent:

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

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	HARVEY GRANGER			07/14/2015
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DP	Title	DV	
Name	GREENE, A HUGH	Name	WILBANKS, JOHN F	
Address	841 PRUDENTIAL DR SUITE 1601	Address	841 PRUDENTIAL DR SUITE 1601	
City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32207	
Title	DVT	Title	VS	
Name	LUKASZEWSKI, MICHAEL	Name	GRANGER, HARVEY	
Address	841 PRUDENTIAL DR SUITE 1602 JACKSONVILLE FL 32207	Address	841 PRUDENTIAL DRIVE, SUITE 1802	
City-State-Zip:		City-State-Zip:	JACKSONVILLE FL 32207	

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

VICE PRESIDENT

07/14/2015 Date

Electronic Signature of Signing Officer/Director Detail

## FILED Jul 14, 2015 Secretary of State CR6041572086

Certificate of Status Desired: Yes