2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000051943

Entity Name: BAPTIST PRIMARY CARE, INC.

Current Principal Place of Business:

3563 PHILIPS HIGHWAY BUILDING A, SUITE 101 JACKSONVILLE, FL 32207

Current Mailing Address:

841 PRUDENTIAL DRIVE SUITE 1802 JACKSONVILLE, FL 32207

FEI Number: 59-3647972

Name and Address of Current Registered Agent:

GRANGER, HARVEY 841 PRUDENTIAL DR STE 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	DP	Title	DC
Name	GREENE, HUGH A	Name	CARLOS, PERRY D.O.
Address	841 PRUDENTIAL DRIVE, SUITE 1601	Address	3563 PHILIPS HIGHWAY, BLDG. A,
City-State-Zip:	JACKSONVILLE FL 32207		SUITE 101 JACKSONVILLE FL 32207
Title	D	Title Name	VP
Name	CLOWER, JAMES M.D.		SIM, EDWARD H.
Address	3563 PHILIPS HIGHWAY, BLDG. A, SUITE 101	Address	841 PRUDENTIAL DRIVE SUITE 1601
City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32207
Title	VP		
Name	DONALDSON, MARSHA		
Address	3563 PHILIPS HIGHWAY BUILDING A SUITE 101		
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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: A. HUGH GREENE

PRESIDENT

04/28/2015

Electronic Signature of Signing Officer/Director Detail

FILED Apr 28, 2015 Secretary of State CC3397218858

Certificate of Status Desired: No

Date