## 2013 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 Certificate of Status Desired: No

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

Date

FILED Apr 29, 2013

**Secretary of State** 

CC7859193273

Officer/Director Detail:

Title DP Title DV

Name GREENE, HUGH A Name MALLY, EARL B

Address 841 PRUDENTIAL DRIVE, SUITE 1601 Address 3563 PHILIPS HIGHWAY, BLDG. A.

Title

SUITE 101

3563 PHILIPS HIGHWAY, BLDG. A,

City-State-Zip: JACKSONVILLE FL 32207

City-State-Zip: JACKSONVILLE FL 32207

Title DC

Name CARLOS, PERRY D.O.

Address 3563 PHILIPS HIGHWAY, BLDG. A,

SUITE 101 Address

City-State-Zip: JACKSONVILLE FL 32207

SUITE 101

City-State-Zip: JACKSONVILLE FL 32207

Title VP

Name SIM, EDWARD H.

Address 841 PRUDENTIAL DRIVE

**SUITE 1601** 

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: EDWARD H. SIM

Electronic Signature of Signing Officer/Director Detail

VICE PRESIDENT

04/29/2013