2018 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

FILED Apr 27, 2018 **Secretary of State** CC3614514626

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

Officer/Director Detail:

Title DΡ Title DC

GREENE, HUGH A CARLOS, PERRY D.O. Name Name

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

SUITE 101

City-State-Zip: JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 City-State-Zip:

Title D

Name

Title VP, DIRECTOR Name CLOWER, JAMES M.D.

DONALDSON, MARSHA Name Address 3563 PHILIPS HIGHWAY, BLDG. A,

3563 PHILIPS HIGHWAY Address SUITE 101

BUILDING A SUITE 101 JACKSONVILLE FL 32207

City-State-Zip: City-State-Zip: JACKSONVILLE FL 32207

Title **SECRETARY** Title VP, D

BAITY, G. SCOTT ZUINO, MATTHEW A. Name

Address 841 PRUDENTIAL DRIVE 841 PRUDENTIAL DRIVE Address **SUITE 1802**

SUITE 1601 JACKSONVILLE FL 32207

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip:

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.