

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000086735

Entity Name: BAPTIST PEDIATRICS, 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 US**FEI Number:** 59-3215071**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAITY, G. SCOTT
841 PRUDENTIAL DR
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:** G. SCOTT BAITY**04/29/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P, D
Name AUBIN, MICHAEL
Address 820 PRUDENTIAL DRIVE
1ST FLOOR
City-State-Zip: JACKSONVILLE FL 32207

Title VP, D
Name GROOVER, TIMOTHY MD
Address 841 PRUDENTIAL DRIVE, SUITE 1601
City-State-Zip: JACKSONVILLE FL 32207

Title VS
Name BAITY, G. SCOTT
Address 841 PRUDENTIAL DRIVE, SUITE 1802
City-State-Zip: JACKSONVILLE FL 32207

Title VP, D
Name DONALDSON, MARSHA
Address 3563 PHILIPS HIGHWAY
BUILDING A, SUITE101
City-State-Zip: JACKSONVILLE FL 32207

Title TREASURER
Name TICKELL, KEITH
Address 841 PRUDENTIAL DRIVE
SUITE 1602
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: G. SCOTT BAITY**SECRETARY****04/29/2022**

Electronic Signature of Signing Officer/Director Detail

Date