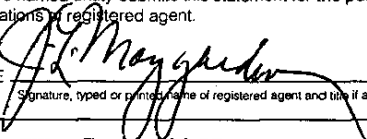
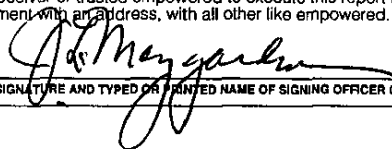


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90305 024 ****61.25

DOCUMENT # 733552 1. Entity Name BAPTIST HEALTH CARE FOUNDATION, INC.					
Principal Place of Business 1010 W BLOUNT STREET PO BOX 17500 (ZIP 32522-7500) PENSACOLA, FL 32501			Mailing Address 1010 W BLOUNT STREET PO BOX 17500 (ZIP 32522-7500) PENSACOLA, FL 32501		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-0192265	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent MAYGARDEN, JERRY L. 1717 NORTH "E" STREET, SUITE #320 PENSACOLA, FL 32501				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				\$8.75 Additional Fee Required	
SIGNATURE 				Jerry L. Maygarden Foundation President 4/15/04	
Filing Fee is \$61.25 Due by May 1, 2004				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVC TICE, JOHN P JR. 909 E. CERVANTES ST. STE B PENSACOLA, FL 32501	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVC Ball, B. Kirk 1701 W. Garden St. Pensacola, FL 32501	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FREDERICKSON, ROSEMARY 800 N. 12TH AVE PENSACOLA, FL 32501	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Usry, Milton 6553 Terrasanta Pensacola, FL 32504	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAYGARDEN, JERRY L. 1717 N. "E" STREET STE 320 PENSACOLA, FL 32501	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC BOWYER, LARRY M 316 S. BAYLEN STREET PENSACOLA, FL 32501	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST MORETTE, RICHARD P MORETTE COMPANY, BOX 13452 PENSACOLA, FL 32596	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: 4/15/04 Daytime Phone #: (850) 469-7906					