2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758405

Entity Name: FOUNDATION OF BAY MEDICAL CENTER, INC.

FILED Apr 30, 2004 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | |
|--|--|--|--|
| EXECUTIVE DIRECTOR 615 NORTH BONITA AVENUE PANAMA CITY, FL 32401 | | | |
| Current Mailing Address: | | New Mailing Address: | |
| EXECUTIVE DIRECTOR 615 NORTH BONITA AVENUE PANAMA CITY, FL 32401 | | | |
| FEI Number: | 59-2130556 FEI Number Applied For () FEI Number Applied For () | mber Not Appli | cable () Certificate of Status Desired () |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | |
| JOHNSON, STEVEN M 615 NORTH BONITA AVENUE PANAMA CITY, FL 32401 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 |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | DV () Delete MOODY, JAMES R IV 509 HARRISON AVENUE, SUITE 206 PANAMA CITY, FL 32401 | Title: Name: Address: City-St-Zip: | DP (X) Change () Addition MOODY, JAMES R IV 509 HARRISON AVENUE, SUITE 206 PANAMA CITY, FL 32401 |
| Title: Name: Address: City-St-Zip: | DP () Delete BRUDNICKI, GREG 2403 HARRISON AVENUE PANAMA CITY, FL 32405 | Title: Name: Address: City-St-Zip: | D (X) Change () Addition BRUDNICKI, GREG 2403 HARRISON AVENUE PANAMA CITY, FL 32405 |
| Title: Name: Address: City-St-Zip: | D () Delete SKINNER, FLOYD 2023 THOMAS DRIVE PANAMA CITY BEACH, FL 32408 | Title: Name: Address: City-St-Zip: | DT (X) Change () Addition GOOLSBY, LISA 2583 HUNTCLIFF LANE PANAMA CITY, FL 32405 |
| Title: Name: Address: City-St-Zip: | DS () Delete YANKE, AUGUST F 201 E. 19TH STREET PANAMA CITY, FL 32405 | Title: Name: Address: City-St-Zip: | DS (X) Change () Addition SPANN, REBECCA 3900 MARRIOTT DRIVE #12 PANAMA CITY, FL 32408 |
| Title: Name: Address: City-St-Zip: | DT () Delete GORMAN, NADIA 469 W. 23RD STREET PANAMA CITY, FL 32405 | Title: Name: Address: City-St-Zip: | DV (X) Change () Addition GORMAN, NADIA 469 W. 23RD STREET PANAMA CITY, FL 32405 |

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: TAMMY HENELY D 04/30/2004

() Delete

HENELY, TAMMY

201 NANCY AVENUE

PANAMA CITY BCH., FL

Name:

Address:

City-St-Zip:

(X) Change () Addition

HENELY, TAMMY

201 NANCY AVENUE

PANAMA CITY BCH., FL 32407