2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# 758405

Entity Name: FOUNDATION OF BAY MEDICAL CENTER, INC.

Current Principal Place of Business:

EXECUTIVE DIRECTOR
615 NORTH BONITA AVENUE
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

EXECUTIVE DIRECTOR
615 NORTH BONITA AVENUE
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-2130556 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JOHNSON, STEVEN M
615 NORTH BONITA AVENUE
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

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:

Title: DP ( ) Delete
Name: MOODY, JAMES R IV
Address: 509 HARRISON AVENUE, SUITE 206
City-St-Zip: PANAMA CITY, FL 32401

Title: D ( ) Delete
Name: BRUDNICKI, GREG
Address: 2403 HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: DT ( ) Delete
Name: GOOLSBY, LISA
Address: 2583 HUNTCLIFF LANE
City-St-Zip: PANAMA CITY, FL 32405

Title: DS ( ) Delete
Name: SPANN, REBECCA
Address: 3900 MARRIOTT DRIVE #12
City-St-Zip: PANAMA CITY, FL 32408

Title: DV ( ) Delete
Name: GORMAN, NADIA
Address: 469 W. 23RD STREET
City-St-Zip: PANAMA CITY, FL 32405

Title: D ( ) Delete
Name: HENELY, TAMMY
Address: 201 NANCY AVENUE
City-St-Zip: PANAMA CITY BCH., FL 32407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MOODY, JAMES R IV
Address: 509 HARRISON AVENUE, SUITE 206
City-St-Zip: PANAMA CITY, FL 32401

Title: DP (X) Change ( ) Addition
Name: GORMAN, NADIA
Address: 469 W. 23RD STREET
City-St-Zip: PANAMA CITY, FL 32405

Title: DT (X) Change ( ) Addition
Name: NATIONS, DONALD F
Address: 1366 W. 15TH STREET
City-St-Zip: PANAMA CITY, FL 32401

Title: DV (X) Change ( ) Addition
Name: SPANN, REBECCA
Address: 3900 MARRIOTT DRIVE #12
City-St-Zip: PANAMA CITY, FL 32408

Title: DS (X) Change ( ) Addition
Name: GRAMLING, CHARLEY A III
Address: 202 FOREST PARK CIRCLE
City-St-Zip: PANAMA CITY, FL 32405

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: TAMMY HENELY D 04/25/2005

Electronic Signature of Signing Officer or Director — Date