

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 24, 2000 8:00 am**  
**Secretary of State**

04-27-2000 90059 022 \*\*\*\*61.25

**DOCUMENT # 770084**

1. Entity Name  
**BAPTIST/ST. VINCENT'S PROPERTIES, INC.**

Principal Place of Business <b>C/O 800 PRUDENTIAL DRIVE                  JACKSONVILLE FL 32207                  US</b>	Mailing Address <b>C/O WILLIAM C. MASON                  1301 RIVERPLACE BLVD #1700                  JACKSONVILLE FL 32207-9029                  US</b>
---	--

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---

City & State	City & State	4. FEI Number <b>59-2487133</b>	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**HARVEY GRANGER, GENERAL COUNSEL  
 1301 RIVERPLACE BLVD  
 SUITE 1700  
 JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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.  
 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution.  **\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT COOPER, EDGAR 1301 RIVERPLACE BLVD #1700 JACKSONVILLE FL</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HUGHES, CHARLES 1301 RIVERPLACE BLVD #1700 JACKSONVILLE FL</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP MASON, WILLIAM C 1301 RIVERPLACE BLVD #1700 JACKSONVILLE FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DV THOMPSON, CAROL C 1301 RIVERPLACE BLVD #1700 JACKSONVILLE FL</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DC WATSON, WILLIAM 1301 RIVERPLACE BLVD #1700 JACKSONVILLE FL</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V PARRETT, DONALD O 1301 RIVERPLACE BLVD #1700 JACKSONVILLE FL</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>See Attachment</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Rebecca B. Jackson Secretary 4-19-00 904/202-4005  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRZE037 19/991

DOCUMENT # 770084  
BAPTIST/ST. VINCENT'S PROPERTIES, INC.

Attachment  
# 770084  
~~A0047934~~

2 of 2

DC	Maher, John J.	1301 Riverplace Blvd. Suite 1700	Jacksonville, FL 32207
DP	Greene, A. Hugh	1301 Riverplace Blvd. Suite 1700	Jacksonville, FL 32207
V	Perry, Kenneth C.	1325 San Marco Blvd. Suite 901	Jacksonville, FL 32207
S	Jackson, Rebecca B.	1301 Riverplace Blvd. Suite 1700	Jacksonville, FL 32207
DT	Dvorak, Robert M.	1301 Riverplace Blvd. Suite 1700	Jacksonville, FL 32207

581