

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 770084

FILED  
Mar 25, 2002 8:00 AM  
Secretary of State

Entity Name: BAPTIST HEALTH PROPERTIES, INC.

**Current Principal Place of Business:**

1325 SAN MARCO BLVD.  
SUITE 902  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O HARVEY GRANGER  
1325 SAN MARCO BLVD. SUITE 902  
JACKSONVILLE, FL 32207 US

**New Mailing Address:**

FEI Number: 59-2487133      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HARVEY GRANGER, GENERAL COUNSEL  
1325 SAN MARCO BLVD.  
SUITE 902  
JACKSONVILLE, FL 32207 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: DC      ( ) Delete  
Name: GREENE, A. HUGH  
Address: 1325 SAN MARCO BLVD. SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32207

Title: DP      ( ) Delete  
Name: THOMPSON, CAROL C  
Address: 1325 SAN MARCO BLVD. SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: DV      ( ) Delete  
Name: PARRETT, DONALD O  
Address: 1325 SAN MARCO BLVD. SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: DT      ( ) Delete  
Name: LUKASZEWSKI, MICHAEL  
Address: 1325 SAN MARCO BLVD. SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: S      ( ) Delete  
Name: JACKSON, REBECCA B  
Address: 1325 SAN MARCO BLVD. SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: D      ( ) Delete  
Name: MASON, WILLIAM C  
Address: 1325 SAN MARCO BLVD. SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32207 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: REBECCA B. JACKSON

S

03/25/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date