2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770085

FILED Apr 30, 2009 Secretary of State

Entity Name: BAPTIST HEALTH SYSTEM FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1325 SAN MARCO BLVD., SUITE 902 JACKSONVILLE, FL 32207 **Current Mailing Address: New Mailing Address:** 1325 SAN MARCO BLVD., SUITE 902 JACKSONVILLE, FL 32207 FEI Number: 59-2487135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRANGER, HARVEY 1325 SAN MARCO BOULEVARD SUITE 902 JACKSONVILLE, FL 32207 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: () Delete (X) Change () Addition GREENE, HUGH A GREENE, HUGH A Name: Name: 1325 SAN MARCO BLVD. SUITE 902 Address: 1325 SAN MARCO BLVD. SUITE 902 Address: City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: JACKSONVILLE, FL 32207 US Title: () Delete Title: () Change () Addition Name: GRANGER, HARVEY Name: Address: 1325 SAN MARCO BLVD, SUITE 902 Address: City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: Title: () Delete Title: () Change () Addition PARYANI, M.D., SHYAM Name: Name: 1325 SAN MARCO BLVD., SUITE 902 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: Title: () Delete Title: () Change () Addition LUKASZEWSKI, MICHAEL Name: Name: 1325 SAN MARCO BLVD., SUITE 902 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: Title: () Delete Title: () Change () Addition BRADBURY, ROBIN Name: Name: 1325 DAN MARCO BLVD., STE 902 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: HARVEY GRANGER S 04/30/2009