

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017568

FILED
Apr 28, 2010
Secretary of State

Entity Name: BAPTIST PHYSICIAN GROUP, LLC

Current Principal Place of Business:

1717 NORTH E ST
STE 320
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

1717 NORTH E ST
STE 320 ATTN. J. KEHOE
PENSACOLA, FL 32501

New Mailing Address:

1717 NORTH E ST
STE 320 ATTN. MARY MATHEWS
PENSACOLA, FL 32501

FEI Number: 74-3018052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORTER, JOHN
1717 NORTH E ST
STE 320
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

BEGGS & LANE, RLLP
501 COMMENDENCIA ST.
PENSACOLA, FL 32502 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: NIX DANIEL

04/28/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P
Name: PORTER, JOHN
Address: 1717 N. E ST STE 320
City-St-Zip: PENSACOLA, FL 32501

Title: VP
Name: GILLILAND, CHAD
Address: 1040 GULF BREEZE PKWY
City-St-Zip: GULF BREEZE, FL 32561

Title: T
Name: MCGEE, ELEANOR
Address: 1717 N E ST STE 321
City-St-Zip: PENSACOLA, FL 32501

Title: S
Name: HARRISON, DANA
Address: 1040 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32561

Title: AS
Name: PRESSLEY, JAN
Address: 1717 NORTH E ST., STE. 320
City-St-Zip: PENSACOLA, FL 32501

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAN PRESSLEY

AS

04/28/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date