2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2010
Secretary of State

DOCUMENT# N05000001282

Entity Name: BAPTIST SOUTH MEDICAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14546 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32258

New Principal Place of Business:

Current Mailing Address:

14546 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32258

New Mailing Address:

FEI Number: 20-2515616 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SMITH HULSEY & BUSEY
225 WATER STREET SUITE 1800
JACKSONVILLE, FL 32202 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
Name: WILBANKS, JOHN F
Address: 841 PRUDENIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD
Name: DURKIN, CHRISTOPHER R
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207

Title: STD
Name: LUKASZEWSKI, MICHAEL
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: GREEN, A. HUGH
Address: 841 PRUDENTIAL DRIVE, SUITE 1802
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: JOHN F. WILBANKS DP 05/04/2010
Electronic Signature of Signing Officer or Director Date