FILED Apr 30, 2008 8:00 am Secretary of State 04-30-2008 90168 014 ****61.25

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N35375 1. Entity Name BAPTIST MEDICAL CENTER OF THE BEACHES, INC.								60032) 662			
Principal Place of Business 1350 13TH AVENUE SOUTH JACKSONVILLE BEACH, FL 32250 US LACKSONVILLE BEACH, FL 32250 US LACKSONVILLE, FL 32207 US Mailing Address C/O HARVEY GRANGER 1325 SAN MARCO BLVD. SUITE 902 JACKSONVILLE, FL 32207 US												
2. Principal P	lace of Busin	ess - No P.O. Box #	3. Mailing Address							H FLAN O'AN I		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			٥	04102008 Ch	g-NP	CR2E037	(12/06)		
City & State	9		City & State			4.	59-2980620)			plied For Applicable	
Žip		Country	Zip		Cou	intry	5.	. Certificate of Sta	tus Desired		8.75 Add se Required	
	6. Name	and Address of Current R	legistered	Agent		Name	7.	Name and Addr	ess of New Reg	istered Ag	ent	
GRANGER, HARVEY 1325 SAN MARCO BOULEVARD SUITE 902						Street Address (P.O. Box Number is Not Acceptable)						
JACKSONVILLE, FL 32207												
	£3				1	City	-			FL	Zip Code	9
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. I am familiar with, and acc the obligations of registered agent.											and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when refreshing) DATE												
Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Trust Fund Contribu								5.00 May Be ided to Fees		e check p		
10.	DP	OFFICERS AND DIR	ECTORS		11.		ADD	DITIONS/CHANGE	S TO OFFICERS			
NAME	GREENE,	☐ Delate	TITLE NAM		□ Chan				Change	☐ Addition		
STREET ADORESS CITY-ST-ZIP	1	I MARCO BLVD, SUITE VILLE, FL 32207	902			ET ADORESS - ST-ZIP						i
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