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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N42700

1. Corporation Name
BAPTIST HEALTH SYSTEMS OF SOUTH FLORIDA, INC.

Principal Place of Business	Mailing Address
8900 N KENDALL DR MIAMI FL 33176	8900 N KENDALL DR MIAMI FL 33176

2. Principal Place of Business 21 6855 RED ROAD Suite, Apt. #, etc. 22 Suite 600 City & State 23 CORAL GABLES, FL Zip 24 33143-3632 Country 25	2a. Mailing Address 26 6855 RED ROAD Suite, Apt. #, etc. 27 Suite 600 City & State 28 CORAL GABLES, FL Zip 29 33143-3632 Country 30	3. Date Incorporated or Qualifed 03/25/1991 4. FEI Number 65-0267668 ☐ Applied For ☐ Not Applicable 5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

LEHMAN, JODY
8900 N KENDALL DR
MIAMI FL 33176

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable) 6855 RED ROAD

83

84 City CORAL GABLES **FL** 85 Zip Code 33143

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Jody Lehman 4-28-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P NAME KEELEY, BRIAN E. STREET ADDRESS 8900 N KENDALL DR CITY-ST-ZIP MIAMI FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 6855 RED ROAD, Suite 600 1.4 CITY-ST-ZIP CORAL GABLES, FL 33143	☑ Change ☐ Addition
TITLE V NAME LAWSON, RALPH STREET ADDRESS 8900 N. KENDALL DR. CITY-ST-ZIP MIAMI FL	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 6855 RED ROAD, Suite 600 2.4 CITY-ST-ZIP CORAL GABLES, FL 33143	☑ Change ☐ Addition
TITLE ST NAME CLEELAND, REV. D STREET ADDRESS 15444 SW 146TH TERRACE CITY-ST-ZIP MIAMI FL 33196	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VCT NAME RAY, EMIT O DR STREET ADDRESS 5125 SW 149TH PL CITY-ST-ZIP MIAMI FL	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE CT NAME CADMAN, GEORGE E III STREET ADDRESS 15757 S. DIXIE HIGHWAY CITY-ST-ZIP MIAMI FL 33157	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. *I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.* I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4-29-99 305 598 5955
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)

Non-Profit Corporation Annual Report 1999
Document # N42700
Baptist Health Systems of South Florida, Inc.

N42700
532127.90126.45

Section 13: Additions to Officers and Directors in section 12

Titile	Name	Street Address	City-St-Zip
Asst Treasurer, Trustee	George Corrigan	1228 South Greenway Drive	Coral Gables, Fl 33134
Trustee	Albert E. Dotson	17901 SW 78 Ave	Miami, Fl 33157
Trustee	Norman M. Kenyon	9855 SW 69 Ave #310	Miami, Fl 33156
Trustee	W. Peter Temling	5940 SW 116 St	Coral Gables, Fl 33156
Trustee	John Scott Weston	6361 SW 87 Terr.	Miami, Fl 33143
Treasurer, Trustee	H. Robert Berry	7435 SW 147 St	Miami, Fl 33158
Trustee	George E. Cadman	9768 SW 106 Terr.	Miami, Fl 33176
Trustee	Charles M Hood	6441 SW 145 St	Miami, Fl 33158
Asst Secretary, Trustee	Marcos D. Jimenez	10485 SW 70 Ave	Miami, Fl 33156
Trustee	Paul D. May	9900 NE 13 Ave	Miami Shores, Fl 33138
Trustee	Wendell R. Beard	16903 SW 79 Pl	Miami, Fl 33157
Trustee	R. Ray Goode	7240 SW 146th Terr	Miami, Fl 33158
Asst Secretary, Trustee	George P. Harth	8563 Ardoch Road	Miami Lakes, Fl 33016
Trustee	Arva Moore Parks McCabe	1601 South Miami Ave	Miami,Fl 33129
Asst Treasurer, Trustee	Robert Singleton	8496 Old Cutler Road	Coral Gables, Fl 33143
Trustee	Roberta Stokes	9971 SW 144 St	Miami, Fl 33176
Trustee	Rev. David W. Cleeland	15444 SW 146 Terr	Miami, Fl 33196
Trustee	Rev. Richard Ledgister	495 NW 191 St	Miami, Fl 33169
Trustee	Rev. Wilner Maxy	1138 NW 101 St	Miami, Fl 33150
Trustee	Marcos A. Ramos	2765 SW 32 Ct	Miami, Fl 33133
Trustee	Rev. Tom Thompson	50 NE 128 St	Miami, Fl 33161
Trustee	Dr. William W. White	12740 SW 71 Ave	Miami, Fl 33156
Trustee	Dr. Emit O. Ray	5125 SW 149 Pl	Miami, Fl 33185
Trustee	Robert L. Dube	7770 SW 133 Terr	Miami, FL 33156
Trustee	Rev. William L. Chambers	1221 NW 19 St	Homestead, Fl 33030
Trustee	Jay A. Hershoff	148 Severino Drive	Islamorada, Fl 33036