2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State
05-02-2006 90206 038 ****61.25

DOCUMENT # N42700

1. Entity Name
BAPTIST HEALTH SOUTH FLORIDA, INC.

60034537

Principal Place of Business	Mailing Address
6855 RED ROAD SUITE 600 CORAL GABLES, FL 33143-3632	6855 RED ROAD SUITE 600 CORAL GABLES, FL 33143-3632

03172006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0267668 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FRIEDMAN, DAVID R 6855 RED ROAD CORAL GABLES, FL 33143	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS HARTH, GEORGE P 8563 ARDOCK ROAD MIAMI LAKES, FL 330161455	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS ~~MCCADE ARVA MOORE P~~ 1001 S MIAMI AVE MIAMI, FL 33129	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition McCABE, ANNA MOORE PAUL
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~ST~~ CLEELAND, REV. D 15444 SW 146TH TERRACE MIAMI, FL 33196	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE CHAIRMAN ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VCT~~ ~~DUBO, ROBERT~~ L 7770 SW 133RD TERRACE MIAMI, FL 33156	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY DUBO, ROBERT L. ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CT CADMAN, GEORGE E III ~~15757 S. DIXIE HIGHWAY~~ MIAMI, FL 33157	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 17917 S.W. 97 AVENUE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~T~~ ~~BERRY, H. ROBERT SR~~ ~~9100 S DADELAND BLVD #1200~~ ~~MIAMI, FL 33156~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER CALVIN BABCOCK 9200 S. DADELAND BLVD, SUITE 103 MIAMI, FLORIDA 33156 ☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ralph E. Lewis / RALPH E. LEWIS 4/27/06 786 662 7169
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

60034537

Baptist Health South Florida

6855 Red Road
Coral Gables, FL 33143-3632
www.baptisthealth.net

April 28, 2006

Via Federal Express

Division of Corporations
2670 Executive Center Circle-Suite 100
Tallahassee, FL 32301

RE: 2006 Annual Report for Baptist Health South Florida, Inc.
Document #: N42700

Dear Sirs:

Attached for filing is the 2006 Annual Reports for the above-referenced corporation together with check in the amount of $61.25 to cover the filing fee for the annual report.

Should you have any questions, please do not hesitate to contact me at 786-662-7022. Thank you.

Very truly yours,

Felicia E. Gonzalez
Office Administrator

Attachment