2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# N42700

Entity Name: BAPTIST HEALTH SOUTH FLORIDA, INC.

Current Principal Place of Business:

6855 RED ROAD
SUITE 600
CORAL GABLES, FL 331433632

New Principal Place of Business:

Current Mailing Address:

6855 RED ROAD
SUITE 600
CORAL GABLES, FL 331433632

New Mailing Address:

FEI Number: 65-0267668 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRIEDMAN, DAVID R
6855 RED ROAD
CORAL GABLES, FL 33143 US

Name and Address of New Registered Agent:

FRIEDMAN, DAVID R
6855 RED ROAD
SUITE 600
CORAL GABLES, FL 33143 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: DAVID R. FRIEDMAN, ESQ. 01/06/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: AS ( ) Delete
Name: HARTH, GEORGE P
Address: 8563 ARDOCK ROAD
City-St-Zip: MIAMI LAKES, FL 33016

Title: AS ( ) Delete
Name: MCCABE, ARVA MOORE P
Address: 1601 SOUTH MIAMI AVE
City-St-Zip: MIAMI, FL 33129

Title: VC ( ) Delete
Name: CLEELAND, REV. D
Address: 15444 SW 146TH TERRACE
City-St-Zip: MIAMI, FL 33196

Title: S ( ) Delete
Name: DUBE, ROBERT L
Address: 7770 SW 133RD TERRACE
City-St-Zip: MIAMI, FL 33156

Title: CT ( ) Delete
Name: CADMAN, GEORGE E III
Address: 21361 SW 92 AVENUE
City-St-Zip: MIAMI, FL 33189

Title: T ( ) Delete
Name: BABCOCK, CALVIN
Address: 9200 S DADELAND BLVD, SUITE 103
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KEELEY, BRIAN E
Address: 6855 RED ROAD, SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

Title: C (X) Change ( ) Addition
Name: CLEELAND, DAVID W
Address: 6855 RED ROAD, SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

Title: VC (X) Change ( ) Addition
Name: DUBE, ROBERT L
Address: 6855 RED ROAD, SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

Title: S (X) Change ( ) Addition
Name: TEMLING, PETER
Address: 6855 RED ROAD, SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

Title: CFO (X) Change ( ) Addition
Name: LAWSON, RALPH E
Address: 6855 RED ROAD, SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

Title: T (X) Change ( ) Addition
Name: BABCOCK, CALVIN
Address: 6855 RED ROAD, SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BRIAN E. KEELEY PRES 01/06/2009
Electronic Signature of Signing Officer or Director — Date