2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N9600002049 Aug 09, 2000 8:00 am Secretary of State 1. Entity Name "Baymed Staffing Inc." 08-09-2000 90086 019 ****61.25 Principal Place of Business Mailing Address 615 NORTH BONITA AVENUE 615 NORTH BONITA AVENUE PANAMA CITY FL 32401 PANAMA CITY FL 32401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3375726 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Ronald V. Wolff Street Address (P.O. Box Number is Not Acceptable) MILLER, R D 615 NORTH BONITA AVENUE PANAMA CITY FL 32401 Zip Code City FL 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. Ronald V. Wolff, President/CEO July 31, 2000 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min, will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Delete TITLE TITI F CHAPMAN, JOSEPH F III Jimmy Barr NAME NAME STREET ADDRESS 2305 Highway 77 STREET ADDRESS 3412 ROBINSON BAYOU CIRCLE CITY-ST-ZIP CITY-ST-7IP PANAMA CITY FL 32405 Panama City, FL 32405 Tr Change ☐ Addition ☐ Delete TITLE TITLE TBENNETT, DERRICK G III NAME NAME STREET ADDRESS 816 TECH DR STREET ADDRESS 112 E. Third Court CITY-ST-ZIP LYNN HAVEN FL 32444 CITY-ST-ZIP Panama City, FL 32401 ☐ Delete TITLE ☐ Change Addition COOLEY, TOMMY M NAME NAME STREET ADDRESS 2229 JOAN AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32408 Detete ☐ Change ☐ Addition TITLE V:CBURCH, HATTIE B NAME STREET AODRESS 1002 MAPLE AVENUE STREET ADDRESS CITY-ST-ZIP PANAMA CITY FL 32405 CITY-ST-ZIP \overline{T} Addition ☐ Delete ☐ Change TITLE TITI F STRINGER, DOUGLAS L NAME NAME STREET ADDRESS 2139 BRIARWOOD CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32405 ☐ Change TITLE ☐ Delete TITLE Addition TDICK, ANNE H NAME STREET ADDRESS 414 BUNKERS COVE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32401 12. 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 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.

REQUIRODALD V. Wolff, President/CEO

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Áttachment Doc.#19600000 2049 ADO12232

Officers & Directors (cont.)

S/T Andrew W. Stein: 144 Harrison Avenue Panama City, FL 32401

T Rod Morris, M.D. 806 E. Sixth Street Panama City, FL 32401

T Thomas S. Neubauer 704 S. Tyndall Parkway Panama City, FL 32404