

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S28030

FILED
Mar 11, 2010
Secretary of State

Entity Name: BAYCARE HEALTH NETWORK, INC.

Current Principal Place of Business:

701-6TH STREET SOUTH
ST PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

701-6TH STREET SOUTH
ST PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: 59-3047975 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THORNTON, ROBERT W MR
701-6TH STREET SOUTH
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: STEIN, NORMAN V MR
Address: 3100 E FLETCHER AVE, ADMIN DEPT
City-St-Zip: TAMPA, FL 33613 US

Title: C
Name: MALLAH, ISAAC MR
Address: 3001 W MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33607 US

Title: D
Name: BRODY, SUE G MS
Address: 701-6TH STREET SOUTH
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: D
Name: THORNTON, ROBERT W MR.
Address: 701 SIXTH STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33701

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT W. THORNTON

D

03/11/2010

Electronic Signature of Signing Officer or Director

Date