

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700088

Entity Name: BAPTIST HEALTH CARE, INC,

Current Principal Place of Business:

125 BAPTIST WAY, SUITE 6A
ATTN: ELIZABETH C. CALLAHAN
PENSACOLA, FL 32503

Current Mailing Address:

125 BAPTIST WAY, SUITE 6A
ATTN: ELIZABETH C. CALLAHAN
PENSACOLA, FL 32503 US

FEI Number: 59-0657322

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALLAHAN, ELIZABETH C
125 BAPTIST WAY, SUITE 6A
PENSACOLA, FL 32503 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name JACKSON, RONALD E
Address 125 BAPTIST WAY, SUITE 6A
City-State-Zip: PENSACOLA FL 32503

Title TREASURER
Name CLEVELAND, DAVE
Address 125 BAPTIST WAY, SUITE 6A
City-State-Zip: PENSACOLA FL 32503

Title VC
Name STOPP, MARGARET
Address 125 BAPTIST WAY, SUITE 6A
City-State-Zip: PENSACOLA FL 32503

Title SECRETARY
Name SMITH, RICKY W
Address 125 BAPTIST WAY, SUITE 6A
City-State-Zip: PENSACOLA FL 32503

Title ASSISTANT SECRETARY
Name CALLAHAN, ELIZABETH
Address 125 BAPTIST WAY, SUITE 6A
City-State-Zip: PENSACOLA FL 32503

Title IN HOUSE COUNSEL
Name ANDRADE, JESSICA
Address 125 BAPTIST WAY, SUITE 6A
City-State-Zip: PENSACOLA FL 32503

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

SIGNATURE: JESSICA ANDRADE

IN HOUSE COUNSEL

04/09/2025

Electronic Signature of Signing Officer/Director Detail

Date