## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 767266** 

**Entity Name: BAPTIST HEALTH CARE CORPORATION** 

**FILED** Mar 16, 2022 **Secretary of State** 9959689111CC

## **Current Principal Place of Business:**

ATTN: ELIZABETH C CALLAHAN 1717 NORTH E STREET, SUITE 320 PENSACOLA, FL 32501

## **Current Mailing Address:**

ATTN:ELIZABETH C CALLAHAN 1717 NORTH E STREET, SUITE 320 PENSACOLA, FL 32501 US

FEI Number: 59-2425151 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CALLAHAN, ELIZABETH C 1717 NORTH E ST. SUITE 320 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title CHAIRMAN

Name SHELL, STEPHEN B Name PAUL, MARCUS EDMD

Address 1717 NORTH E STREET Address 1717 NORTH E STREET SUITE 320 ATTN: ELIZABETH C SUITE 320 ATTN: ELIZABETH C

CALLAHAN CALLAHAN

PENSACOLA FL 32501 City-State-Zip: City-State-Zip: PENSACOLA FL 32501

Title Title PRESIDENT/CEO CLEVELAND, DAVE Name FAULKNER, MARK T Name

Address 1717 NORTH E STREET Address ATTN:ELIZABETH C CALLAHAN

SUITE 320 ATTN: ELIZABETH C 1717 NORTH E STREET, SUITE 320

**CALLAHAN** PENSACOLA FL 32501 City-State-Zip:

City-State-Zip: PENSACOLA FL 32501

Title **EXECUTIVE ASSISTANT** Title **CFO** 

Name MULLINS, JAN Name GLEASON, MIKE

Address ATTN:ELIZABETH C CALLAHAN Address

ATTN:ELIZABETH C CALLAHAN 1717 NORTH E STREET, SUITE 320 1717 NORTH E STREET, SUITE 320

City-State-Zip: PENSACOLA FL 32501 City-State-Zip: PENSACOLA FL 32501

SIGNATURE: JAN MULLINS **EXEC ASST** 03/16/2022

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.