

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000008323

Entity Name: BAYCARE PASCO, INC.

Current Principal Place of Business:

2985 DREW STREET
CLEARWATER, FL 33759

Current Mailing Address:

2985 DREW STREET
CLEARWATER, FL 33759 US

FEI Number: 83-2099849

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAYCARE HEALTH SYSTEM, INC.
ATTENTION: LEGAL SERVICES DEPARTMENT
2985 DREW STREET
CLEARWATER, FL 33759 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: JENNIFER L TOUSE

01/23/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GUY, KIMBERLY
Address 2985 DREW STREET
City-State-Zip: CLEARWATER FL 33759

Title TREASURER
Name MCBRIDE, MARK
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

Title CHAIRMAN
Name MITCHELL, DEWEY
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

Title SECRETARY
Name KENNEDY, HOPE
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR
Name FINK, RYAN
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR
Name OSTREM, ROBYN
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR
Name SCHRADER, TERRY
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR
Name WHALEY, KARI
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

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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: KIMBERLY GUY

PRESIDENT

01/23/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HYMES, ADRIENNE
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR
Name ALVAREZ, MICHAEL DR.
Address 4501 BRUCE B. DOWNS BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544