

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000101644

**FILED  
Apr 28, 2017  
Secretary of State  
CC5717216429**

**Entity Name:** BAPTIST PHYSICIAN ENTERPRISE SERVICES, INC.

**Current Principal Place of Business:**

3563 PHILIPS HIGHWAY  
BUILDING A, SUITE 101  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

841 PRUDENTIAL DRIVE  
SUITE 1802  
JACKSONVILLE, FL 32207

**FEI Number:** 27-1524995

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GRANGER, HARVEY ESQ  
841 PRUDENTIAL DRIVE  
SUITE 1802  
JACKSONVILLE, FL 32207 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	D	Title	D, PRESIDENT
Name	GREENE, HUGH	Name	WILBANKS, JOHN F
Address	841 PRUDENTIAL DRIVE, SUITE 1601	Address	841 PRUDENTIAL DRIVE, SUITE 1601
City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32207
Title	S	Title	TREASURER
Name	GRANGER, HARVEY	Name	TONEY, RICK
Address	841 PRUDENTIAL DRIVE, SUITE 1802	Address	3563 PHILIPS HIGHWAY BUILDING A SUITE 101
City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32207

*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: HARVEY GRANGER SECRETARY 04/28/2017  
\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail Date