2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000085634

Entity Name: BAPTIST OCCUPATIONAL HEALTH, INC.

FILED
Apr 29, 2013
Secretary of State
CC1352922486

Current Principal Place of Business:

841 PRUDENTIAL DRIVE SUITE 1802 JACKSONVILLE, FL 32207

Current Mailing Address:

C/O HARVEY GRANGER 841 PRUDENTIAL DRIVE, SUITE 1802 JACKSONVILLE, FL 32207 US

FEI Number: 59-3214040 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRANGER, HARVEY 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 DVP Title DP

Name DURKIN, CHRISTOPHER Name LUKASZEWSKI, MICHAEL

Address 841 PRUDENTIAL DRIVE, SUITE 1802 Address 841 PRUDENTIAL DRIVE, SUITE 1602

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: JACKSONVILLE FL 32207

Title D Title ST

Name GREENE, A. HUGH Name GRANGER, HARVEY

Address 841 PRUDENTIAL DRIVE, SUITE 1601 Address 841 PRUDENTIAL DRIVE, SUITE 1802

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: JACKSONVILLE FL 32207

Title \

Name LEE, STEPHEN

Address 841 PRUDENTIAL DRIVE, SUITE 1802

City-State-Zip: JACKSONVILLE FL 32207

SIGNATURE: HARVEY GRANGER

SECRETARY/TREASURER 04/29/2013

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.