2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000042980

Entity Name: BAPTIST MEDICAL GROUP, LLC

Current Principal Place of Business:

1717 NORTH E STREET
SUITE 320
PENSACOLA, FL 32501

Current Mailing Address:

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

FEI Number: 26-4800380

FILED
Mar 17, 2020
Secretary of State
2165377904CC

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALLAHAN, ELIZABETH
1717 NORTH E ST.
STE. 320
PENSACOLA, FL 32501 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

Authorized Person(s) Detail :

Title	MBR
Name	BAPTIST HOSPITAL, INC.
Address	1717 NORTH E STREET SUITE 320
City-State-Zip:	PENSACOLA FL 32501

Title	OTHER
Name	MULLINS, JAN
Address	1717 NORTH E STREET SUITE 320 - ATTN: JAN MULLINS
City-State-Zip:	PENSACOLA FL 32501

Title	MGR
Name	CARDWELL, JULIE
Address	1717 NORTH E STREET SUITE 320 - ATTN: ELIZABETH CALLAHAN
City-State-Zip:	PENSACOLA FL 32501

Title	AUTHORIZED MEMBER
Name	RAYNES, SCOTT
Address	1717 NORTH E STREET SUITE 320 - ATTN: ELIZABETH CALLAHAN
City-State-Zip:	PENSACOLA FL 32501

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAN MULLINS EXEC ASST 03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date