2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N00253

### Entity Name: 4710 MEDICAL ARTS CONDOMINIUM ASSOCIATION, INC.

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

4710 N. HABANA AVE. TAMPA, FL 33614

### **Current Mailing Address:**

305 S MACDILL AVE TAMPA, FL 33609 US

## FEI Number: 59-2388081

Name and Address of Current Registered Agent:

DYKES, WALTER 4710 N. HABANA AVE SUITE 101 TAMPA, FL 33614 US FILED Apr 29, 2014 Secretary of State CC1894148259

Date

Certificate of Status Desired: No

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

#### Officer/Director Detail :

Officer/Director Detail :							
PD	Title	SD					
MASTANDREA, FRANK G	Name	GRECO OD, JAMES L					
4710 N HABANA AVE #400	Address	4710 N HABANA AVE #204					
TAMPA FL 33614	City-State-Zip:	TAMPA FL 33614					
VD	Title	D					
PEDREGAL MD, ARTHUR J DR.	Name	WALTER, DYKES					
	Address	4710 N HABANN AVE 101					
	City-State-Zip:	TAMPA FL 33614					
TAMPA FL 33014	Title	DIRECTOR					
PRESIDENT, DIRECTOR	Name	FORADADA, JOSE DR.					
MASTANDREA, FRANK G DR.	Address	4710 N. HABANA AVE.					
4710 N. HABANA AVE	Address	SUITE 307					
	City-State-Zip:	TAMPA FL 33614					
TAMIFA FL 33014	Title	DIRECTOR					
DIRECTOR		FORADADA, JOSE DR.					
CASTELVI, ALINA							
4710 N. HABANA AVE.	Address	4710 N. HABANA AVE. SUITE 307					
SUITE 307	City-State-Zip:	TAMPA FL 33614					
IAMPA FL 33614		-					
	PD MASTANDREA, FRANK G 4710 N HABANA AVE #400 TAMPA FL 33614 VD PEDREGAL MD, ARTHUR J DR. 4710 N HABANA AVE SUITE 303 TAMPA FL 33614 PRESIDENT, DIRECTOR MASTANDREA, FRANK G DR. 4710 N. HABANA AVE SUITE 400 TAMPA FL 33614 DIRECTOR CASTELVI, ALINA 4710 N. HABANA AVE.	PDTitlePDTitleMASTANDREA, FRANK GName4710 N HABANA AVE #400AddressTAMPA FL 33614City-State-Zip:VDTitlePEDREGAL MD, ARTHUR J DR.Name4710 N HABANA AVE SUITE 303AddressCity-State-Zip:TitlePRESIDENT, DIRECTORTitleMASTANDREA, FRANK G DR.Address4710 N. HABANA AVE SUITE 400City-State-Zip:TAMPA FL 33614TitleDIRECTORCity-State-Zip:TAMPA FL 33614TitleDIRECTORTitleSUITE 400City-State-Zip:TAMPA FL 33614City-State-Zip:TAMPA FL 33614City-State-Zip:TAMPA FL 33614City-State-Zip:TAMPA FL 33614TitleDIRECTORNameCASTELVI, ALINAAddress4710 N. HABANA AVE. SUITE 307City-State-Zip:					

#### Continues on page 2

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: FRANK G MASTANDREA	PRES	04/29/2014
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Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	CASTELVI, ALINA	Name	FORADADA, JOSE DR.
Address	4710 N. HABANA AVE. SUITE 307	Address	4710 N. HABANA AVE. SUITE 307
City-State-Zip:	TAMPA FL 33614	City-State-Zip:	TAMPA FL 33614
Title	DIRECTOR		

Name CASTELVI, ALINA Address 4710 N. HABANA AVE. SUITE 307

City-State-Zip: TAMPA FL 33614