## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001448

Entity Name: PADDOCK PARK MEDICAL CENTER PROPERTY OWNERS'

ASSOCIATION, INC.

Apr 14, 2016 Secretary of State CC9940542675

**FILED** 

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

2100 S.E. 17TH STREET SUITE 802 OCALA, FL 34471

## **Current Mailing Address:**

2100 S.E. 17TH STREET SUITE 802 OCALA, FL 34471 US

FEI Number: 59-3767208 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

EHLERS, HENRY A 2100 S.E. 17TH STREET SUITE 802 OCALA, FL 34471 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 DPTS Title D

Name EHLERS, HENRY A Name GRESH, JOHN P

Address 2100 S.E. 17TH STREET, SUITE 802 Address 3301 SW 34 CIRCLE, SUITE 101

City-State-Zip: OCALA FL 34471 City-State-Zip: OCALA FL 34474

Title D

Name MILLER, STEPHEN R

Address 3301 SW 34 CIRCLE, SUITE 102

City-State-Zip: OCALA FL 34474

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: HENRY A. EHLERS

**PRESIDENT** 

04/14/2016