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. 04/29/2013 SIGNATURE: MORRIS LEFKOWITZ PRESIDENT

Electronic Signature of Signing Officer/Director Detail

1801 HIGHLAND AVE. TAMPA, FL 33602 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

Officer/Director Detail :

Officer/Director Detail :				
Title	Р	Title	V	
Name	LEFKOWITZ, MORRIS	Name	GROSZ, JUDY	
Address	3928 PREMIER NORTH DRIVE	Address	3928 PREMIER NORTH DRIVE	
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618	
Title	ST	Title	D	
Title Name	ST SCHACHTER, ROBERT	Title Name	D TAWIL, JUDITH	
			-	
Name	SCHACHTER, ROBERT	Name	TAWIL, JUDITH	

DOCUMENT# N0400009003 Entity Name: SOUTH TAMPA MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC.

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

3928 PREMIER NORTH DRIVE TAMPA, FL 33618

Current Mailing Address:

3928 PREMIER NORTH DR

APPLETON, ERIC N

Name and Address of Current Registered Agent:

TAMPA, FL 33618

FEI Number: 11-3733557

Certificate of Status Desired: Yes

Date

FILED Apr 29, 2013 Secretary of State CC2575009539

Date