

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009312

**Entity Name:** MIDTOWN PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

415 N GADSDEN STREET  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

PO BOX 3965  
TALLAHASSEE, FL 32315 US

**FEI Number: 26-1265908**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SWAIN, PATRICIA  
215 W COLLEGE AVE  
TALLAHASSEE, FL 32301 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:** PATRICIA SWAIN

01/21/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DICKISON, KEN  
Address        415 N GADSDEN STREET  
                  MIDTOWN PLACE CONDOS  
City-State-Zip: TALLAHASSEE FL 32301

Title            VP  
Name            RIBACK, MITCHELL  
Address        415 N GADSDEN STREET  
                  MIDTOWN PLACE CONDO  
                  ASSOCIATION  
City-State-Zip: TALLAHASSEE FL 32301

Title            STD  
Name            BISHOP, SONNY  
Address        411 EAST WASHINGTON ST  
City-State-Zip: PERRY FL 32347

Title            RECEIVER  
Name            CAPITAL ASSOCIATION  
                  MANAGEMENT LLC  
Address        PO BOX 3965  
City-State-Zip: TALLAHASSEE FL 32315

*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:** KYLE ROWELL, CAPITAL ASSOCIATION  
MANAGEMENT LLC

RECIEVER

01/21/2022

Electronic Signature of Signing Officer/Director Detail

Date