

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10987

**FILED**  
**Feb 12, 2015**  
**Secretary of State**  
**CC4502325897**

**Entity Name:** MIDTOWN OFFICE PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1229 S TAMIAMI TRAIL  
SARASOTA, FL 34239

**Current Mailing Address:**

1229 S TAMIAMI TRAIL  
SARASOTA, FL 34239

**FEI Number:** 59-2694847

**Certificate of Status Desired:** No

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

MESHAD, JOHN W  
1229 S TAMIAMI TRAIL  
SARASOTA, FL 34239 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 PD  
Name MESHAD, GAVIN W  
Address 1229 S TAMIAMI TRAIL  
City-State-Zip: SARASOTA FL 34239

Title VPD  
Name ZAMORA, DR. I  
Address 1219 S EAST AVE #310  
City-State-Zip: SARASOTA FL

Title STD  
Name COATS, MARION MD  
Address 1219 S EAST AVE #210  
City-State-Zip: SARASOTA FL 34239

*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:** GAVIN W MESHAD

PD

02/12/2015

Electronic Signature of Signing Officer/Director Detail

Date