Current Mai	ling Address:			
P.O. BOX 15 SPRING HIL	570 L, FL 34604 US			
FEI Number: 59-3087231			Certificate of Status Desired: No	
Name and A	Address of Current Registered Age	nt:		
PROFESSIONA 13452 BOLTON SPRING HILL,				
The above name	d entity submits this statement for the purpose of cha	nging its registered office or regis	tered agent, or both, in the State of	Florida.
SIGNATURE: SUSAN K MACKERT				
	- SUSAN KIMAGKERI			01/07/2013
	Electronic Signature of Registered Agent			01/07/2013 Date
Officer/Dire	Electronic Signature of Registered Agent			
Officer/Dire	Electronic Signature of Registered Agent	Title	т	
	Electronic Signature of Registered Agent	Title Name	T POLI, MICHAEL T	
Title	Electronic Signature of Registered Agent ctor Detail : P			
Title Name	Electronic Signature of Registered Agent ctor Detail : P MCKINNON, SHAUNA P PO BOX 15570	Name	POLI, MICHAEL T PO BOX 15570	
Title Name Address	Electronic Signature of Registered Agent ctor Detail : P MCKINNON, SHAUNA P PO BOX 15570	Name Address	POLI, MICHAEL T PO BOX 15570	
Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : P MCKINNON, SHAUNA P PO BOX 15570 SPRING HILL FL 34604	Name Address	POLI, MICHAEL T PO BOX 15570	
Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : P MCKINNON, SHAUNA P PO BOX 15570 SPRING HILL FL 34604 S	Name Address	POLI, MICHAEL T PO BOX 15570	

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: SHAUNA MCKINNON

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/07/2013

FILED Jan 07, 2013 **Secretary of State** CC9553590192

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43339

Entity Name: SEVEN HILLS COMMUNITY MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13452 BOLTON COURT SPRING HILL, FL 34609

Date