

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002946

Entity Name: SWANN MEDICAL COMPLEX PROPERTY OWNERS' ASSOCIATION, INC.**FILED**
Mar 22, 2023
Secretary of State
2315813168CC**Current Principal Place of Business:**1420 CELEBRATION BLVD
SUITE 308
CELEBRATION, FL 34747**Current Mailing Address:**1420 CELEBRATION BLVD
SUITE 308
CELEBRATION, FL 34747**FEI Number: 59-3609374****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HEYSEK, RANDY V
40107 HIGHWAY 27
DAVENPORT, FL 33837 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: RANDY HEYSEK****03/22/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DS
Name	CAMB, JOLGEL
Address	2231 N BLVD W
City-State-Zip:	DAVENPORT FL 33837

Title	DV
Name	MURRAY, IVAN
Address	2235 N BLVD W
City-State-Zip:	DAVENPORT FL 33837

Title	PD
Name	HEYSEK, RANDY V
Address	2243 N BLVD W
City-State-Zip:	DAVENPORT FL 33837

Title	TD
Name	MANUBENS, CLAUDIO
Address	2239 A NORTH BLVD W
City-State-Zip:	DAVENPORT FL 33837

Title	OTHER
Name	COLON, EDWARD
Address	1420 CELEBRATION BLVD SUITE 308
City-State-Zip:	CELEBRATION FL 34747

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: RANDY V HEYSEK**MANAGER****03/22/2023**

Electronic Signature of Signing Officer/Director Detail

Date