NONPROFIT **CORPORATION ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 734603

2. Principal Place of Business 21 219 Palermo Place

MEDICAL GARDENS OF VENICE OWNERS ASSOCIATION, IN

Principal Place of Business 205 PALERMO PLACE VENICE FL 34285

Mailing Address

205 PALERIMO PLACE VENICE FL 34285

2a. Mailing Address

28 219 Palermo Place

FILED Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90025 041 ****61.25

Applied For

547439 - 90023 - 7

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Date Incorporated or Qualifed

12/15/1975 FEI Number

22	m, 510.	27				59-2762959	_	No	t Applicable
City & State		City & State				 		\$8.75	
23 Ve ni		28 Venice				5. Certificate of Status	Desired 🔲	Fee Re	
Zip	Country	Zip	Count	ry		6. Election Campaign I	inancina —	\$5.00	May Re
24 342°		28648	30 (کلا	A	Trust Fund Contribu	- 11	Added t	
<u> </u>	9. Name and Address of Current R		1001		<u> </u>	10. Name and Address	of New Regis	tered Agent	
			В	1 Na	me				
HOOF BOOFFIT F HD				- - 		an (D.O. Daw Number in N	at Assantable)	 	
MOSS, ROBERT E MD				2 St	Bet Accre	Palermo Pl	от <i>пос</i> ершое) <i>«СЕ</i> .		
PIPRIS PALERMO PLACE VENICE FL 34285				3	~ 1 _	1 0110		-	
VENICE FI	L 34283		L					1-1-2	s. 3.
			В	4 Cit	Vlen	ice		FL 85 34	382
11 Duraumnt	to the provisions of Sections 617.0502 a	nd 617 1508 Florida Statut	es, the abo	ve-nar	ned como	ration submits this statem	ent for the purpo	sa of changing its	registered
	anistamed agent or both in the State of I	40040 Siich chenne wet 9	HIDODZBA D	v mar	corporation	n's board of directors. I he	any accept an	abbounding as in	gistered
agent la	m familiar with, and accept the obligation	is of, Section 617.0503, Flo	nga Statuté	73.			7-27-	-41	
SIGNATURE	Signature, typed or printed name of registered agent an	distribution (MOTE	- Constant A	and eleme	turn required	when reinstating)	<u> </u>	ATE	
12.	OFFICERS AND I		13.			ADDITIONS/CHANGI	S TO OFFICE	RS AND DIRECTO	RS IN 12
TIPLE	•	DELETE	1.1 TITLE	:				☐ Change	Addition
NAME	TYLER, THOMAS		1.2 NAME	<u>.</u>					
STREET ADDRESS	s 213 PALERMO PLACE			ET ADDR	ess				
1				ST-ZIP					
CITY-ST-ZIP	ST STEED	DELETE	2.1 TITLE					☐ Change	Addition
		A 2000.	22 NAM						_
NAME	FREEMAN, JOHN A JR M		2.3 STRE		eee				
STREET ADDRESS	205 PALERMO PL		1			_	•		
-CITY-ST-ZIP	-VENICE FL 34285 · · ·	☐ DELETE	2.4 CITY 3.1 TITLE		_			☐ Change	Addition
TITLE	M PD	Cottere	3.7 NAME					<u></u>	_
NAME -	MOSS, ROBERT E	P))							
STREET ADDRESS	210 1 ALLI 010 1 DAGE	Ð	3.3 STRE		ESS				
CITY-ST-ZIP	VENICE FL 34285	DELETE	3A, CITY					Change	Addition
TITLE	Eugenio Erquiaga	_	4.1 TILE			•		مور،و م	
NAME	Eugenio Erquiaga 205 Palermo Place	ST	4. 2 NAM	_					
SINCEIALONEON	Venice FL 34285		4.3 STRE		ESS				
CITY-ST-ZIP	venice FC 37F03	Пер	4.4 CITY-					☐ Change	Addition
TITLE		☐ DELETÉ	5.1 TITLE						المستدر
NAME			5.2 NAME						
STREET ADORESS	•		5.3 STRE	•	ESS				
CITY-ST-ZIP			5.4 CITY-					C) Channe	» Addision
TILE		☐ DELETÉ	6.1 TITLE		- 1			Change	- Addition
NAME			8.2 NAME		- [
STREET ADDRESS	39.22		6.3 STRE	ETADOR	ESS				
	in steel and the		6.4 CITY-					50 of 50 of 50	
14.: I hereby o	certify that the information supplied with t	his filing does not qualify for	the exemp	otion st	ated in Se	action 119.07(3)(i), Florida	Statutes. I furth	er certify that the in	tormation

officer or director of the corporation or the receiver or trustee empowered to execute this report as re Block 12 or Block 13 if changed, or op an attachment with an address, with all other like empowered.