2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2010
Secretary of State

DOCUMENT# 756374

Entity Name: MED. CONDO. ASSN., INC.

Current Principal Place of Business:

1439C MEDITERRANEAN DR
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7555
NORTH PORT, FL 34290 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BINDER, BRENDA S
1485 FITZGERALD ROAD
NORTH PORT, FL 34288 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: TD
Name: BEECH, BARBARA
Address: 1439 MEDITERRANEAN DRIVE
City-St-Zip: PUNTA GORDA, FL

Title: D
Name: RICHARDS, THAYLE
Address: 7427 RIDGE EDGE COURT
City-St-Zip: FLORENCE, KY 41042

Title: PD
Name: BOLAS, MICHAEL
Address: P.O. BOX 510571
City-St-Zip: PUNTA GORDA, FL 33950

Title: D
Name: SCHULTZ, RAYMOND
Address: 514 APACHE TRL E
City-St-Zip: LAKE VILLA, IL 60046

Title: D
Name: BEHRMAN, JOAN
Address: 1439-B MEDITERRANEAN DR
City-St-Zip: PUNTA GORDA, FL 33950

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: MICHAEL BOLAS P 04/28/2010

Electronic Signature of Signing Officer or Director Date