

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90065 005 ****61.25

0025268

DOCUMENT # 756648

1. Corporation Name

THE FLORIDA KEYS MEDICAL COMPLEX CONDOMINIUM ASS
OCIATION, INC.

Principal Place of Business

8151 OVERSEAS HWY
MARATHON FL 33050

Mailing Address

8151 OVERSEAS HWY
MARATHON FL 33050

102197 - 90065 - 5



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

03/06/1981

4. FEI Number

59-2033607

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MANKOWITZ, BARRY J. M.D.
8151 OVERSEAS HIGHWAY, SUITE 500
MARATHON FL 33050

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature] BARRY J MANKOWITZ MD

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 15, 1999

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MANKOWITZ, BARRY J
STREET ADDRESS 8151 OVERSEAS HWY
CITY-ST-ZIP MARATHON FL 33050

TITLE VD ☐ DELETE

NAME O'CONNOR, JOHN P. MD
STREET ADDRESS 8151 OVERSEAS HWY
CITY-ST-ZIP MARATHON FL 33050

TITLE SD ☐ DELETE

NAME FORSTER, JAMES W
STREET ADDRESS 8151 OVERSEAS HWY
CITY-ST-ZIP MARATHON FL 33050

TITLE TD ☐ DELETE

NAME WOLSZCZAK, ANDREW
STREET ADDRESS 8151 OVERSEAS HWY
CITY-ST-ZIP MARATHON FL 33050

TITLE D ☒ DELETE

NAME BOTELHO, GEORGE
STREET ADDRESS 8151 OVERSEAS HWY
CITY-ST-ZIP MARATHON FL 33050

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] BARRY J MANKOWITZ MD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 15 1999 305743 5544

Date

Daytime Phone #

CR2E037 (11/98)