

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007279

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Entity Name:** SEVENTH AVENUE NORTH MEDICAL BUILDING CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

681 GOODLETTE ROAD NORTH  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

6237 PRESIDENTIAL COURT  
SUITE D  
FORT MYERS, FL 33919

**New Mailing Address:**

6237 PRESIDENTIAL COURT  
SUITE 130  
FORT MYERS, FL 33919

FEI Number: 20-0329962

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BEAL, MICHAEL  
681 GOODLETTE ROAD, NORTH  
SUITE 210  
NAPLES, FL 34102 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: P  
Name: BEAL, MICHAEL  
Address: 681 GOODLETTE ROAD NORTH  
City-St-Zip: NAPLES, FL 34102

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 BEAL

MGMR

02/25/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date