2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2010
Secretary of State

DOCUMENT# N03000008106

Entity Name: EICHENFELD OAKS MEDICAL CENTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6418 BADGER DRIVE
TAMPA, FL 336102004

New Principal Place of Business:

Current Mailing Address:

6418 BADGER DRIVE
TAMPA, FL 336102004

New Mailing Address:

FEI Number: 20-5898243 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VILLALON, HILDE B
6418 BADGER DRIVE
TAMPA, FL 33610 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: D
Name: LANG, ROBERT A
Address: 6418 BADGER DRIVE
City-St-Zip: TAMPA, FL 33610

Title: PD
Name: MOWAT, CHARLES
Address: 6418 BADGER DRIVE
City-St-Zip: TAMPA, FL 33610

Title: STD
Name: VILLALON, HILDE
Address: 6418 BADGER DRIVE
City-St-Zip: TAMPA, FL 33610

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: HILDE B. VILLALON STD 01/21/2010
Electronic Signature of Signing Officer or Director Date