

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005406

FILED
Apr 12, 2012
Secretary of State

Entity Name: SOUTH ORANGE MEDICAL CENTER CONDO ASSOCIATION, INC.

Current Principal Place of Business:

11183 S. ORANGE BLOSSOM TRAIL
SUITE 18-E
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

4502 SW 35TH STREET
SUITE 200
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 56-2467463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASCHACHER, PAUL C DDS
4502 35TH STREET
SUITE 200
ORLANDO, FL 32811 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: QURESHI, TAKIRA
Address: 11183 S. ORANGE BLOSSOM TRAIL, STE. A
City-St-Zip: ORLANDO, FL 32837

Title: D
Name: HERNANDEZ, RICK
Address: 11183 S. ORANGE BLOSSOM TR., STE D
City-St-Zip: ORLANDO, FL 32837

Title: P
Name: ASCHACHER, PAUL C DDS
Address: 11183 S. ORANGE BLOSSOM TRAIL, STE. E
City-St-Zip: ORLANDO, FL 32837

Title: D
Name: MOON LIGHT MANAGMENT 1 LLC
Address: 7550 FUTURE DRIVE SUITE 201
City-St-Zip: ORLANDO, FL 32819

Title: D
Name: KWOK, HINGHIN
Address: 11183 S. ORANGE BLOSSOM TR., STE G
City-St-Zip: ORLANDO, FL 32837

Title: D
Name: VIVES, EMILY MD
Address: 11183 S. ORANGE BLOSSOM TR., STE D
City-St-Zip: ORLANDO, FL 32837

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: DR. PAUL ASCHACHER

PRES

04/12/2012

Electronic Signature of Signing Officer or Director

_____ Date