

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04641

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** MIDTOWN PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

12811 KENWOOD LN.  
SUITE 115  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

**Current Mailing Address:**

12811 KENWOOD LN.  
SUITE 115  
FORT MYERS, FL 33907 US

**New Mailing Address:**

**FEI Number:** 20-1373751

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FORTINER, A. D'ETTE  
12811 KENWOOD LN.  
SUITE 115  
FORT MYERS, FL 33907 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: PD  
Name: BARTHOLOMEW, BRUCE PRES.  
Address: 1560 MATTHEW DR, SUITE 'H'  
City-St-Zip: FORT MYERS, FL 33907

Title: STD  
Name: MATTHEW DRIVE, LLC  
Address: 1685 MENLO RD.  
City-St-Zip: FORT MYERS, FL 33901

Title: D  
Name: DARBY, JAMES D  
Address: 1560 MATTHEW DR., SUITE 'J'  
City-St-Zip: FORT MYERS, FL 33907

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: BRUCE BARTHOLOMEW

PRRE

02/22/2011

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

\_\_\_\_\_  
Date