

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04920

FILED
Jan 10, 2012
Secretary of State

Entity Name: COMMUNITY MEDICAL CENTER ASSOCIATION, INC.

Current Principal Place of Business:

1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 59-2466149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMAN, ALAN A ESQ.
1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756 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: OFC
Name: MYDG MANAGEMENT GROUP, L.L.C.
Address: 1245 COURT STREET, SUITE 102
City-St-Zip: CLEARWATER, FL 33756

Title: SD
Name: KAUFMAN, STUART J
Address: 1245 COURT STREET, SUITE 102
City-St-Zip: CLEARWATER, FL 33756

Title: TD
Name: CARUSO, MICHAEL
Address: 1245 COURT STREET, SUITE 102
City-St-Zip: CLEARWATER, FL 33756

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: ALAN GASSMAN

PRES

01/10/2012

Electronic Signature of Signing Officer or Director

Date