## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05477

FILED Jan 11, 2012 Secretary of State

Entity Name: OAK HILL MEDICAL PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

4389 TIOGA AVE. 13779 LINDEN DRIVE

SPRING HILL, FL 34608 SPRING HILL, FL 34609 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 6209 13779 LINDEN DRIVE

SPRING HILL, FL 34609 SPRING HILL, FL 34611 US

FEI Number: 59-2497409 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PROFESSIONAL ASSOCIATION MANAGEMENT LLC PROFESSIONAL ASSOCIATION MANAGEMENT LLC

13799 LINDEN DRIVE 13779 LINDEN DRIVE

SPRING HILL, FL 34609 US SPRING HILL, FL 34609 US

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: 01/11/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

TRACY, DEBORAH P Name: Address: 13779 LINDEN DRIVE City-St-Zip: SPRING HILL, FL 34609 US

Title:

Name: IDICULA, JOSEPH T Address: 13779 LINDEN DRIVE City-St-Zip: SPRING HILL, FL 34609 US

Title:

DINAVAHI, SANKARA S Name: Address: 13779 LINDEN DRIVE City-St-Zip: SPRING HILL, FL 34609 US

Title: VΡ

Name: FOREMAN, ROB V 13779 LINDEN DRIVE Address: City-St-Zip: SPRING HILL, FL 34609 US

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: DEBORAH TRACY Ρ 01/11/2012