

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05499

FILED
Jan 21, 2009
Secretary of State

Entity Name: SUN CITY MEDICAL CENTER CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

%STEPHEN J. DAUGHERTY
4016 SUN CITY CENTER BOULEVARD
SUN CITY CENTER, FL 33573 US

New Principal Place of Business:

%LOUIS F. CAPUTO
4016 SUN CITY CENTER BOULEVARD
SUN CITY CENTER, FL 33573 US

Current Mailing Address:

%LINCOLN HARRIS
4300 W CYPRESS ST #350
TAMPA, FL 33607 US

New Mailing Address:

FEI Number: 59-2954927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAUGHERTY, STEPHEN J CEO
4016 SUN CITY CENTER BOULEVARD
SUN CITY CENTER, FL 33573 US

Name and Address of New Registered Agent:

CAPUTO, LOUIS F COO
4016 SUN CITY CENTER BOULEVARD
SUN CITY CENTER, FL 33573 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: LOUIS F. CAPUTO

01/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KREBS, JOSEPH MD
Address: 1901 HAVERFORD AVE
City-St-Zip: SUN CITY CENTER, FL

Title: CEO () Delete
Name: DAUGHERTY, STEPHEN J
Address: 4016 SUN CITY CENTER BOULEVARD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D () Delete
Name: OVERMAN, MARK M.D.
Address: 1901 HAVERFORD AVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: CFO () Delete
Name: YOUNG, RUSSELL
Address: 4016 SUN CITY CENTER BLVD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D (X) Delete
Name: BEHNKE, DONALD M.D.
Address: 1901 HAVERFORD AVE
City-St-Zip: SUN CITY CENTER, FL 33573

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COO (X) Change () Addition
Name: CAPUTO, LOUIS
Address: 4016 SUN CITY CENTER BOULEVARD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D (X) Change () Addition
Name: OVERMAN, MARK M.D.
Address: 1901 HAVERFORD AVENUE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D (X) Change () Addition
Name: BEHNKE, DONALD M.D.
Address: 1901 HAVERFORD AVE
City-St-Zip: SUN CITY CENTER, FL 33573

Title: CFO (X) Change () Addition
Name: SHAWN, GREGORY
Address: 4016 SUN CITY CENTER BLVD
City-St-Zip: SUN CITY CENTER, FL 33573

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LOUIS F. CAPUTO

COO

01/21/2009

Electronic Signature of Signing Officer or Director

Date