

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002789

FILED
Feb 18, 2010
Secretary of State

Entity Name: MIDPOINT PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4790 BARKLEY CIRCLE BLDG A
FT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

4790 BARKLEY CIRCLE BLDG A
FT MYERS, FL 33907

New Mailing Address:

FEI Number: 20-4572747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARMA, NEEKAYTAN DR.
4790 BARKLEY CIRCLE BLDG A
FT 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: D
Name: SHARMA, NEEKAYTAN DR.
Address: 4790 BARKLEY CIRCLE BLDG A
City-St-Zip: FT MYERS, FL 33907

Title: D
Name: GANTT, KERRI
Address: 8741 BANYAN COVE CIRCLE
City-St-Zip: FT MYERS, FL 33919

Title: D
Name: FEIOCK, BRIAN MD
Address: 6541 WINKLER ROAD
City-St-Zip: FT MYERS, FL 33919

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: NEEKAYTAN SHARMA

D

02/18/2010

Electronic Signature of Signing Officer or Director

Date