

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003963

FILED  
Mar 09, 2010  
Secretary of State

**Entity Name:** MEDICAL PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SIMMONS, LA PLANT AND ASSOCIATES  
201 E KENNEDY BLVD, SUITE 715  
TAMPA, FL 33602 US

**New Principal Place of Business:**

C/O LAPLANT & RAINEY, CPA, PA  
201 E KENNEDY BLVD, SUITE 715  
TAMPA, FL 33602 US

**Current Mailing Address:**

C/O NEW PORT PROPERTY MANAGEMENT, LLC  
PO BOX 173181  
TAMPA, FL 336720181 US

**New Mailing Address:**

**FEI Number:** 20-5703980      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NEW PORT PROPERTY MANAGEMENT, LLC  
112 S 12TH STREET  
SUITE D  
TAMPA, FL 33602 US

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

LAPLANT & RAINEY, CPA, PA  
201 E KENNEDY BLVD  
SUITE 715  
TAMPA, FL 336720181 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: ROBERT E LAPLANT

03/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: JOHNSON, GREG  
Address: 5026 TRENTON ST  
City-St-Zip: TAMPA, FL 33619 US

Title: DP  
Name: VOLENEC, GARY  
Address: 112 S 12TH STREET, SUITE D  
City-St-Zip: TAMPA, FL 33602 US

Title: DVP  
Name: JOHNSON, SCOTT  
Address: 5026 TRENTON ST  
City-St-Zip: TAMPA, FL 33619 US

Title: ST  
Name: LAPLANT, ROBERT  
Address: 201 E KENNEDY BLVD, SUITE 715  
City-St-Zip: TAMPA, FL 33602 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: GARY VOLENEC

DP

03/09/2010

Electronic Signature of Signing Officer or Director

Date