

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005139

FILED
Mar 01, 2010
Secretary of State

Entity Name: 1250 MEDICAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6935 15TH STREET EAST
SUITE 116
SARASOTA, FL 34243

New Principal Place of Business:

7519 PENNSYLVANIA AVENUE
SUITE 102
SARASOTA, FL 34243

Current Mailing Address:

6935 15TH STREET EAST
SUITE 116
SARASOTA, FL 34243

New Mailing Address:

7519 PENNSYLVANIA AVENUE
SUITE 102
SARASOTA, FL 34243

FEI Number: 26-1239638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DILLON, TAMMY
6935 15TH STREET EAST
SUITE 116
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

DILLON, TAMMY
7519 PENNSYLVANIA AVENUE
SUITE 102
SARASOTA, FL 34243 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: TAMMY DILLON

03/01/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: PRICE, BEN E
Address: 7519 PENNSYLVANIA AVENUE SUITE 102
City-St-Zip: SARASOTA, FL 34243

Title: VD
Name: PRICE, BART
Address: 7519 PENNSYLVANIA AVENUE SUITE 102
City-St-Zip: SARASOTA, FL 34243

Title: ST
Name: DILLON, TAMMY
Address: 7519 PENNSYLVANIA AVENUESUITE 102
City-St-Zip: SARASOTA, FL 34243

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: BEN E. PRICE

PD

03/01/2010

Electronic Signature of Signing Officer or Director

Date