2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2011
Secretary of State

DOCUMENT# N07000002709

Entity Name: MID TOWN CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 IMMOKALEE RD #309
NAPLES, FL 34110 US

New Principal Place of Business:

2180 IMMOKALEE RD
#305
NAPLES, FL 34110 US

Current Mailing Address:

2180 IMMOKALEE RD #309
NAPLES, FL 34110 US

New Mailing Address:

2180 IMMOKALEE RD
#305
NAPLES, FL 34110 US

FEI Number: 20-8650086 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLOHN, WILLIAM L
2180 IMMOKALEE RD #309
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

KLOHN, WILLIAM L
2180 IMMOKALEE RD #305
NAPLES, FL 34110 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: _____ 03/22/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD
Name: KLOHN, WILLIAM L
Address: 2180 IMMOKALEE RD, STE 305
City-St-Zip: NAPLES, FL 34110 US

Title: VPST
Name: KLOHN, DONALD K
Address: 3770 DUNLAP ST N
City-St-Zip: ARDEN HILLS, MN 55112

Title: D
Name: GROVE, JAMES
Address: 2180 IMMOKALEE RD #305
City-St-Zip: NAPLES, FL 34110

Title: D
Name: KLOHN, DONALD K
Address: 3770 DUNLAP ST N
City-St-Zip: ARDEN HILLS, MN 55112

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: WILLIAM L. KLOHN PD 03/22/2011
Electronic Signature of Signing Officer or Director — Date