

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005411

FILED
Aug 28, 2012
Secretary of State

Entity Name: KISSIMMEE MEDICAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

302 WEST BASS STREET
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

882 JACKSON AVENUE
WINTER PARK, FL 32789

New Mailing Address:

302 WEST BASS STREET
KISSIMMEE, FL 34741

FEI Number: 26-1468205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORDAN, BRETT M
882 JACKSON AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

CHRISTIANSON, COLLEEN M
302 W BASS STREET
KISSIMMEE, FL 34741 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: COLLEEN M CHRISTIANSON

08/28/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: ARVELO, GUSTAVO M.D.
Address: 505 W OAK STREET, SUITE 101
City-St-Zip: KISSIMMEE, FL 34741

Title: PD
Name: JIMENEZ, RAFAEL M.D.
Address: 302 WEST BASS STREET
City-St-Zip: KISSIMMEE, FL 34741

Title: S/T
Name: ESTRADA, NAPOLEAN M.D.
Address: 320 WEST BASS
City-St-Zip: KISSIMMEE, FL 34741

Title: D
Name: CHRISTIANSON, COLLEEN
Address: 302 W BASS
City-St-Zip: KISSIMMEE, FL 34741

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: RAFAEL JIMENEZ

PD

08/28/2012

Electronic Signature of Signing Officer or Director

Date