2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2011
Secretary of State

DOCUMENT# N09000001134

Entity Name: SUMMIT MEDICAL PARK PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

735 HWY 466
LADY LAKE, FL 32159

New Principal Place of Business:

Current Mailing Address:

1300 W NORTH BLVD
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 30-0555697 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHICK, DAVID L ESQ.
301 E. PINE ST., SUITE 1400
ORLANDO, FL 32801 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: PD
Name: KERINA, J. MANDUME
Address: 701 MEDICAL PLAZA DR.
City-St-Zip: LEESBURG, FL 34348

Title: VPD
Name: REYES, PABLO
Address: 1106 N PALMETTO STREET
City-St-Zip: LEESBURG, FL 34748

Title: SD
Name: UPADAYA, SHRIKANTH
Address: 753 HWY 466
City-St-Zip: LADY LAKE, FL 32159

Title: TD
Name: CORTEZA, QUINTIN
Address: 401 E NORTH BLVD, SUITE 102B
City-St-Zip: LEESBURG, FL 34748

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: J M KERINA PRES 04/14/2011

Electronic Signature of Signing Officer or Director Date