

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002981

FILED
Feb 23, 2011
Secretary of State

Entity Name: SEBASTIAN MEDICAL SUITES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

801 WELLNESS WAY
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

PO BOX 1056
VERO BEACH, FL 32961

New Mailing Address:

FEI Number: 26-4702555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMMONS, REBECCA F ESQ
3355 OCEAN DRIVE
VERO BEACH, FL 32963 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: DP
Name: BROWN, HAL W MD
Address: 1265 36TH STREET
City-St-Zip: VERO BEACH, FL 32960

Title: DV
Name: SHAFER, STUART J MD
Address: 1260 37TH STREET
City-St-Zip: VERO BEACH, FL 32960

Title: DS
Name: ARDEN, CHRISTOPHER D
Address: 2920 CARDINAL DR
City-St-Zip: VERO BEACH, FL 32963

Title: DT
Name: LUTON, MICHAEL
Address: 1265 36TH STREET
City-St-Zip: VERO BEACH, FL 32960

Title: D
Name: SUSI, JEFFREY L
Address: 1000 36TH STREET
City-St-Zip: VERO BEACH, FL 32960

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: C. DEREK ARDEN

DS

02/23/2011

Electronic Signature of Signing Officer or Director

Date