2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2011
Secretary of State

DOCUMENT# N09000003936

Entity Name: GULF COAST MEDICAL PARK COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5260 DUNCAN ROAD
UNIT 6
PUNTA GORDA, FL 33982

New Principal Place of Business:

Current Mailing Address:

5260 DUNCAN ROAD
UNIT 6
PUNTA GORDA, FL 33982

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MADDEN, JOSEPH M JR.
2277 MAIN STREET
FORT MYERS, FL 33901 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: PST
Name: KARLSTEDT, MAGNUS
Address: 5260 DUNCAN ROAD, UNIT 6
City-St-Zip: PUNTA GORDA, FL 33982

Title: D
Name: KARLSTEDT, MAGNUS
Address: 5260 DUNCAN ROAD, UNIT 6
City-St-Zip: PUNTA GORDA, FL 33982

Title: D
Name: KARLSTEDT, MARTHA
Address: 5260 DUNCAN ROAD, UNIT 6
City-St-Zip: PUNTA GORDA, FL 33982

Title: D
Name: KLINGENBERG, MARTIN
Address: 5260 DUNCAN ROAD, UNIT 6
City-St-Zip: PUNTA GORDA, FL 33982

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: MAGNUS KARLSTEDT PST 01/24/2011

Electronic Signature of Signing Officer or Director — Date