

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000004227

**FILED**  
**Apr 07, 2011**  
**Secretary of State**

**Entity Name:** GREENWICH MEDICAL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

600 UNIVERSITY BOULEVARD, SUITE 105  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

600 UNIVERSITY BOULEVARD, SUITE 105  
JUPITER, FL 33458

**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:**

GY CORPORATE SERVICES, INC.  
777 SOUTH FLAGLER DRIVE  
SUITE 500 EAST  
WEST PALM BEACH, FL 33401 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: SMITH, JOSHUA K DR.  
Address: 600 UNIVERSITY BOULEVARD, SUITE 105  
City-St-Zip: JUPITER, FL 33458

Title: DV  
Name: BANSAL, RAJ DR.  
Address: 605 SOUTH BEACH ROAD  
City-St-Zip: TEQUESTA, FL 33469

Title: DST  
Name: LUBARSKY, AMIR DR.  
Address: 125 MYSTIC LANE  
City-St-Zip: JUPITER, FL 33469

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: JOSHUA SMITH

DP

04/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date