2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2010
Secretary of State

DOCUMENT# N18418

Entity Name: WEST ORLANDO MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11140 W COLONIAL DR
SUITE 1
OCOEE, FL 347613325 US

New Principal Place of Business:

Current Mailing Address:

11140 WEST COLONIAL DR
SUITE 1
OCOEE, FL 347613325 US

New Mailing Address:

FEI Number: 59-3002489 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSWELL-CHARKOW, DON R.
11140 W COLONIAL DRIVE
SUITE 1
OCOEE, FL 34761 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: VTD
Name: BUSWELL-CHARKOW, DON R.
Address: 11140 W COLONIAL DRIVE SUITE 1
City-St-Zip: OCOEE, FL

Title: SD
Name: BUSWELL-CHARKOW, SANDI
Address: 11140 W COLONIAL DRIVE STE 1
City-St-Zip: OCOEE, FL

Title: PD
Name: BRINT, STEVEN L
Address: 11140 W COLONIAL DR STE 2
City-St-Zip: OCOEE, FL 34761

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: STEVEN L. BRINT PD 02/11/2010

Electronic Signature of Signing Officer or Director — Date