

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43339

FILED
Feb 12, 2011
Secretary of State

Entity Name: SEVEN HILLS COMMUNITY MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4389 TIOGA AVE.
SPRING HILL, FL 34608 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6209
SPRING HILL, FL 34611 US

New Mailing Address:

FEI Number: 59-3087231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVANDIS, JOHN J
4389 TIOGA AVE.
SPRING HILL, FL 34608 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: CONTRERAS-SOTO, ALEX
Address: 10461 QUALITY DR
City-St-Zip: SPRING HILL, FL 34609

Title: VPSD
Name: SANTORIO, GINO
Address: 10461 QUALITY DR
City-St-Zip: SPRING HILL, FL 34609

Title: TD
Name: MCMULLEN, JEFFREY
Address: 10461 QUALITY DR
City-St-Zip: SPRING HILL, FL 34609

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: GINO SANTORIO

VPSD

02/12/2011

Electronic Signature of Signing Officer or Director

Date