

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003867

FILED
Mar 31, 2009
Secretary of State

Entity Name: THE HEART AND VASCULAR PAVILION CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1240 S. FORT HARRISON AVENUE
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

C/O PERSHING, YOAKLEY & ASSOCIATES
2963 GULF TO BAY BLVD., STE. 267
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 59-3518640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLINE, HARRY S
625 COURT ST
2ND FL
CLEARWATER, FL 33756 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 () Delete
Name: ZIECHECK, HAL
Address: 1240 S. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33756

Title: VD () Delete
Name: MURBACH, RICHARD MD
Address: 1240 S. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33756

Title: SD () Delete
Name: SIMMONS, FREDERIC JR
Address: 1240 S. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33756

Title: T () Delete
Name: ONEIL, DAVID
Address: 1240 S. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRY HAEFNER

A

03/31/2009

Electronic Signature of Signing Officer or Director

Date