

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000163007

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** FAMILY CONDO, INC.

**Current Principal Place of Business:**

155 CARLYLE DRIVE  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

155 CARLYLE DRIVE  
PALM HARBOR, FL 34683

**New Mailing Address:**

**FEI Number:** 11-3734777

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEHART, PAUL E  
390 N. ORANGE AVE., SUITE 2200  
ORLANDO, FL 32801 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:** D  
**Name:** DEHART, PAUL E  
**Address:** 7237 MOSS LEAF LANE  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** D  
**Name:** SCHUSTER, GREGORY  
**Address:** 509 REBSTOCK BLVD  
**City-St-Zip:** PALM HARBOR, FL 34683

**Title:** D  
**Name:** DEICHMAN, GREGORY  
**Address:** 155 CARLYLE DRIVE  
**City-St-Zip:** PALM HARBOR, FL 34683

**Title:** D  
**Name:** STEPAN, JOE  
**Address:** 30 BLEN HEIM RD  
**City-St-Zip:** SHALIMAR, FL 32579

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** GREG DEICHMAN

D

04/30/2011

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

\_\_\_\_\_  
Date