## **2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14903

Entity Name: MEDICAL SPECIALISTS CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 13, 2022
Secretary of State
3838315803CC

# **Current Principal Place of Business:**

333 W. COCOA BEACH CSWY. COCOA BEACH. FL 32931

## **Current Mailing Address:**

1980 N. ATLANTIC AVE SUITE 614 COCOA BEACH . FL 32931 US

FEI Number: 59-2462598 Certificate of Status Desired: No.

# Name and Address of Current Registered Agent:

RASTELLO, CRAIG 1980 N. ATLANTIC AVE SUITE 614 COCOA BEACH, FL 32931 US

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: CRAIG RASTELLO 04/13/2022

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

TitlePRESIDENT, TREASURERTitleMEMBER AT LARGENameLUDWIG, GERALDNameWIDICK, MICHAEL DR.

Address PO BOX 33309 Address 333 W COCOA BEACH CSWY, #2

City-State-Zip: INDIALANTIC FL 32903 City-State-Zip: COCOA BEACH FL 32931

TitleVP, SECRETARYTitleMEMBER AT LARGENameLUDWIG, CYNTHIANameCALLENBERGER, PEGGYAddressPO BOX 33309Address333 W. COCOA BEACH CSWY.<br/>SUITE E

City-State-Zip: INDIALANTIC FL 32903 City-State-Zip: COCOA BEACH FL 32931

Title MEMBER AT LARGE
Name CREW, ERICA DR

Address 333 W COCOA BEACH CSWY

UNIT 1

City-State-Zip: COCOA BEACH FL 32903

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: CYNTHIA LUDWIG

Electronic Signature of Signing Officer/Director Detail

VP, SECRETARY

04/13/2022