

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746645

FILED
May 02, 2008
Secretary of State

Entity Name: OLIVE GLEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3102 N.W. 3RD AVE.
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

3102 N.W. 3RD AVE.
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 59-1999509 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBERT KAYES & ASSOCIATES, P.A.
6261 NW 6 WAY STE 103
FT LAUDERDALE, FL 33309 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: P () Delete
Name: CLOBES, DONALD
Address: 610 SE 4TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP () Delete
Name: MILLER, ESTHER
Address: 3004 N.W. 4TH AVENUE, #2
City-St-Zip: POMPANO BEACH, FL 33064

Title: ST () Delete
Name: CLOBES, KRISTINE
Address: 2420 NE 8TH TERRACE
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: HOLSTRUM, RANDY
Address: 201 NW 32ND COURT #206
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: VAIDYA, RAVI
Address: 1083 SW 134TH COURT
City-St-Zip: MIAMI, FL 33184

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change () Addition
Name: CLOBES, KRISTINE
Address: 2436 N. FEDERAL HWY. #379
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: D (X) Change () Addition
Name: BANCROFT, JOHN
Address: 22236 SW 64 AVE
City-St-Zip: BOCA RATON, FL 33428

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: KRISTINE CLOBES

ST

05/02/2008

Electronic Signature of Signing Officer or Director

_____ Date