

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757097

FILED
Mar 16, 2011
Secretary of State

Entity Name: OLIVELEAF CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5190 LAS VERDES CR.
DELRAY BEACH, FL 33484 US

New Principal Place of Business:

Current Mailing Address:

817 GEORGE BUSH BLVD.
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: 59-2088171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M. J. GALLUP ACCOUNTING
817 GEORGE BUSH BLVD.
DELRAY BEACH, FL 33483 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: VPD
Name: KLEIMAN, SOL
Address: 5190 LAS VERDES CIRCLE #202
City-St-Zip: DELRAY BEACH, FL 33484

Title: PD
Name: BERARDI, NICK
Address: 5190 LAS VERDES CIRCLE #112
City-St-Zip: DELRAY BEACH, FL 33484

Title: D
Name: LEEDS, LORI
Address: 5190 LAS VERDES CIRCLE #216
City-St-Zip: DELRAY BEACH, FL 33484

Title: D
Name: RODRIGUEZ, JUAN
Address: 5190 LAS VERDES CIRCLE #217
City-St-Zip: DELRAY BEACH, FL 33484

Title: TD
Name: CARVAJAL, BLANCA
Address: 5190 LAS VERDES CR., #212
City-St-Zip: DELRAY BEACH, FL 33484

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: NICK BERARDI

PD

03/16/2011

Electronic Signature of Signing Officer or Director

Date