

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769991

FILED
May 04, 2010
Secretary of State

Entity Name: INTERNATIONAL CLUB AT VILLAGES OF ORIOLE ASSOCIATION, INC.

Current Principal Place of Business:

C/O PHOENIX MANagements SERVICES, INC.
3082 JOG ROAD
LAKE WORTH, FL 33467 US

New Principal Place of Business:

C/O PHOENIX MANagements SERVICES, INC.
4800 N. STATE ROAD SEVEN #105
LAUDERDALE LAKES, FL 33319 US

Current Mailing Address:

C/O PHOENIX MANagements SERVICES, INC.
3082 JOG ROAD
LAKE WORTH, FL 33467 US

New Mailing Address:

C/O PHOENIX MANagements SERVICES, INC.
4800 N. STATE ROAD SEVEN #105
LAUDERDALE LAKES, FL 33319 US

FEI Number: 59-2415688 **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:

Name and Address of New Registered Agent:

DICKER, KRIVOK & STOloff PA
1818 AUSTRALIAN AVENUE SOUTH
SUITE 400
WEST PALM BEACH, FL 33409 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: GEIGER, SANFORD
Address: 14896 BAL MORAL LANE, #103
City-St-Zip: DELRAY BEACH, FL 33446

Title: VPD
Name: BLOOM, SANDY
Address: 14888 WEDGEFIELD DRIVE, #108
City-St-Zip: DELRAY BEACH, FL 33446

Title: SD
Name: PHILLIPS, ED
Address: 14896 BAL MORAL LANE, #106
City-St-Zip: DELRAY BEACH, FL 33446

Title: D
Name: FRISCH, AVIVA
Address: 14895 BUILTmore WAY, #112
City-St-Zip: DELRAY BEACH, FL 33446

Title: TD
Name: FRISS, MERLYN
Address: 6586 SOUTHURST TERRACE, #107
City-St-Zip: DELRAY BEACH, FL 33446

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: SANFORD GEIGER

PD

05/04/2010

Electronic Signature of Signing Officer or Director

Date