

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009784

FILED
May 24, 2006
Secretary of State

Entity Name: O.R.D.P., INC.

Current Principal Place of Business:

435 NORTHWEST 148TH STREET
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 611663
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

LITTLE RIVER HISTORICAL CULTURAL & EDC
7521 N.W. 3 AVE.
SUITE 1A
MIAMI, FL 33150 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: D () Delete
Name: SHUFORD, LORNA
Address: 435 NORTHWEST 148TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Delete
Name: ACCIUS, WILNER
Address: 435 NORTHWEST 148TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: D () Delete
Name: GAUDIN, LAVARIS
Address: 435 NORTHWEST 148TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: P () Delete
Name: PRUDENT, PAMELA
Address: 435 NORTHWEST 148TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: VP () Delete
Name: AUGUSTIN, JOSEPH
Address: 435 NORTHWEST 148TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: S () Delete
Name: CHEREFRERE, MICHEL
Address: 435 NORTHWEST 148TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH AUGUSTIN

VP

05/24/2006

Electronic Signature of Signing Officer or Director

Date