

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007506

FILED  
Apr 09, 2012  
Secretary of State

**Entity Name:** ORIOLE ESTATES CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

5440 N. STATE RD. 7  
SUITE 214  
FORT LAUDERDALE, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

5440 N. STATE RD. 7  
SUITE 214  
FORT LAUDERDALE, FL 33319

**New Mailing Address:**

FEI Number: 45-0570529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAW OFFICE OF KIMBERLY BOBO-BROWN, P.A.  
5440 N. STATE RD. 7  
SUITE 212  
FT. LAUDERDALE, FL 33319 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  
Name: BOBO-BROWN, KIMBERLY  
Address: 5440 N STATE RD 7 SUITE 214  
City-St-Zip: FT LAUDERDALE, FL 33319

Title: S  
Name: ANDERSON, KATHLEEN  
Address: 5440 N STATE RD 7 SUITE 214  
City-St-Zip: FT LAUDERDALE, FL 33319

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: KIMBERLY BOBO-BROWN

P

04/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date