2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008
Secretary of State

DOCUMENT# N14078

Entity Name: TOWNHOMES AT ORANGE DRIVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

801 HOLLY LN
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

801 HOLLY LN
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 59-2695211 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAMMYER, DANIEL L., CPA
801 HOLLY LN
PLANTATION, FL 33317 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: PD ( ) Delete
Name: MILLER, ROY
Address: 4208 SW 70 TERR
City-St-Zip: DAVIE, FL 33314

Title: VP ( ) Delete
Name: PETRAGNANI, PATRICIA
Address: 4423 SW 70TH TERR
City-St-Zip: DAVIE, FL 33314

Title: D ( ) Delete
Name: SMITH, ANGELA
Address: 4325 SW 70 TERRACE
City-St-Zip: DAVIE, FL 33314

Title: D ( ) Delete
Name: DURAL, CATHY
Address: 4210 SW 70 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: DS ( ) Delete
Name: GUPTON, ANDY
Address: 7125 SW 42ND CT
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: FRIEDMAN, JUDITH
Address: 7120 SW 42 PLACE
City-St-Zip: DAVIE, FL 33314

Title: VPD (X) Change ( ) Addition
Name: NUNEZ, IRVING
Address: 4268 SW 70TH TERR
City-St-Zip: DAVIE, FL 33314

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

Title: STD (X) Change ( ) Addition
Name: EMERSON, CHARLOTTE
Address: 4210 SW 70 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: D (X) Change ( ) Addition
Name: SALINAS, MANUEL
Address: 4305 SW 70 TERRACE
City-St-Zip: DAVIE, FL 33314

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: JUDITH FRIEDMAN P 04/23/2008
Electronic Signature of Signing Officer or Director — Date