2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001359

FILED Feb 28, 2007 Secretary of State

Entity Name: THE ORCHARDS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O SOUTHWEST PROPERTY MGMT 1044 CASTELLO DR #206 NAPLES FL 34103 **New Mailing Address: Current Mailing Address:** C/O SOUTHWEST PROPERTY MGMT 1044 CASTELLO DR #206 NAPLES, FL 34103 FEI Number: 65-0475573 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SOUTHWEST PROPERTY MANAGEMENT 1044 CASTELLO DR STE 206 NAPLES, FL 34103 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition NOONE, BARBARA Name: Name: 7798 GARDNER DRIVE, #201 Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: Title: PD () Delete Title: (X) Change () Addition RAMOS, JOHN Name: RAMOS, JOHN Name: Address: 7762 GARDNER DRIVE, #202 Address: 7762 GARDNER DRIVE, #202 City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109 Title: () Delete Title: (X) Change () Addition HOWARD, ERNEST DEVOL, JOAN Name: Name: 7804 GARDNER DRIVE, #203 7816 GARDNER DR. #102 Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109 Title: () Delete Title: () Change () Addition Name: DEVOL, EUGENE Name: 7816 GARDNER DRIVE, #102 Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: Title: SD () Delete Title: (X) Change () Addition MAC DONALD, RAY MAC DONALD, RAY Name: Name: 7768 GARDNER DRIVE, #203 7768 GARDNER DRIVE, #203 Address: Address: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109 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: JOHN E RAMOS Ρ 02/28/2007