## 2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## FILED Apr 21, 2008 8:00 am Secretary of State

					cer eta	iy ui Sta	
DOCUMENT # N0400002909  1. Entity Name OBA HOTEL & RESTAURANT ASSOCIATES, INC.				I		90090 032 ****61.	
Principal Place of Business 979 BEACHLAND BLVD VERO BEACH, FL 32963		Mailing Address P 0 BOX 3745 VERO BEACH, FL 32964		- 	II 8:831 B1111 B1111 B1	III BEIN BBINE HEID IBIN BRAN IA	INITEL CE ITEL
Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01222008	Chg-NP	CR2E037 (12/06)	
City & State		City & State		4. FEI Number 20-09250	004		oplied For ot Applicable
Žip	Country	Zip	Country	5. Certificate of	Status Desired	S8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent		7. Name and Ad	idress of New F	Registered Agent	
FENNELL,			Name	***************************************			
	HLAND BLVD ACH, FL 32963		Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
·			City			FL Zip Cod	le
8. 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. I am familiar with, and accept the obligations of registered agent.							
						•	
SIGNATURE .	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: F	Registered Agent signatu	ure required when reinstating)		DATE	**.
SIGNATURE .	Signature, typed or printed name of registered agen Filling Fee is \$61.25 Due by May 1, 2008	s and title if applicable. (NOTE: 6	paign Financing	\$5.00 May Be Added to Fees		DATE  Make check payable trida Department of S	
SIGNATURE .	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Flor	Nake check payable t	tate
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	paign Financing ntribution.	\$5.00 May Be Added to Fees ADDITIONS/CHAN	Flor	Make check payable trida Department of S	tate
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI PD COCHRANE, ELIZABETH 2265 SILVERSANDS CT	9. Election Camp Trust Fund Co	ntribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHAN	Floo GES TO OFFICE	Make check payable trida Department of S	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI  PD COCHRANE, ELIZABETH 2265 SILVERSANDS CT VERO BEACH, FL 32963 SD PFEUNIG, AMANDA 1120 BUCKHEAD DR SW	9. Election Camp Trust Fund Co RECTORS	anign Financing ntribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees  ADDITIONS/CHAN  Sucrefary Peter Pri Sooo Hwy VETO Beac	GES TO OFFICE  ME  N9!  H14 U  H. FL	Make check payable trida Department of S  ERS AND DIRECTORS IN  Change  Change	V 10 Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI  PD COCHRANE, ELIZABETH 2265 SILVERSANDS CT VERO BEACH, FL 32963 SD PFEUNIG, AMANDA 1120 BUCKHEAD DR SW VERO BEACH, FL 32968 VPD FLICKINGER, ROBERT 438 CHALOUPE TERRACE	9. Election Camp Trust Fund Co	Daign Financing Intribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHAN	GES TO OFFICE  ME  N9!  H14 U  H. FL	Make check payable trida Department of S  ERS AND DIRECTORS IN  Change  Change	V 10 Addition Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI  PD COCHRANE, ELIZABETH 2265 SILVERSANDS CT VERO BEACH, FL 32963 SD PFEUNIG, AMANDA 1120 BUCKHEAD DR SW VERO BEACH, FL 32968 VPD FLICKINGER, ROBERT 438 CHALOUPE TERRACE SEBASTIAN, FL 32958 VPD BUFFINO, LISA 137 DAISY LANE	9. Election Camp Trust Fund Co  RECTORS  Delete	Daign Financing Intribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	\$5.00 May Be Added to Fees  ADDITIONS/CHAN  Sucrefary Peter Pri Sooo Hwy VETO Beac	GESTO OFFICE  ME  NGIL  HIA U  H. FC  H, FC	Ake check payable to rida Department of S  ERS AND DIRECTORS IN Change  Change  Change  Change  Change  Change  Change	Addition  Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI  PD COCHRANE, ELIZABETH 2265 SILVERSANDS CT VERO BEACH, FL 32963 SD PFEUNIG, AMANDA 1120 BUCKHEAD DR SW VERO BEACH, FL 32968 VPD FLICKINGER, ROBERT 438 CHALOUPE TERRACE SEBASTIAN, FL 32958 VPD BUFFINO, LISA 137 DAISY LANE SEBASTIAN, FL 32958 TD GEORGIA, IRISH A 266 ZANE AVE	9. Election Camp Trust Fund Co  RECTORS  Delete  Delete	Daign Financing ntribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees  ADDITIONS/CHAN  SECRETARY PETEL PRINTSOOD HWY IN VERO BEACHER  AL BENKER 7246 SELL VERO BEACHER  VER	GESTO OFFICE  ME  NGIL  HIA U  H. FC  H, FC	Make check payable to rida Department of S  ERS AND DIRECTORS IN Change  Change  Change  Change  Change  Change  Change  Change	Addition  Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE!

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR