

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725385

Entity Name: ORIOLE GOLF & TENNIS CLUB CONDOMINIUM ONE D ASSOCIATION, INC.**Current Principal Place of Business:**7847 GOLF CIRCLE DR.
MARGATE, FL 33063**Current Mailing Address:**7777 GOLF CIRCLE DR.
MARGATE, FL 33063**FEI Number: 59-1529231****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VILLENEUVE, JEAN
7847 GOLF CIRCLE DRIVE
UNIT 210
MARGATE, FL 33063 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:** JEAN VILLENEUVE**04/04/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	VILLENEUVE, JEAN
Address	7847 GOLF CIRCLE DRIVE UNIT 210
City-State-Zip:	MARGATE FL 33063
Title	VP
Name	WINK, RICHARD
Address	7847 GOLF CIRCLE DR #202
City-State-Zip:	MARGATE FL 33063
Title	DIRECTOR
Name	SAUVE, MARIO
Address	7847 GOLF CIRCLE DRIVE
City-State-Zip:	MARGATE FL 33063

Title	TREASURER
Name	MENARD, DENIS
Address	7847 GOLF CIRCLE DR #203
City-State-Zip:	MARGATE FL 33063
Title	SECRETARY
Name	HURWITZ, BRINA
Address	7847 GOLF CIRCLE DR. UNIT 103
City-State-Zip:	MARGATE FL 33063
Title	DIRECTOR
Name	FABRIZI, YOLAINE
Address	7847 GOLF CIRCLE DR UNIT 301
City-State-Zip:	MARGATE FL 33063

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: JEAN VILLENEUVE**PRESIDENT****04/04/2016**

Electronic Signature of Signing Officer/Director Detail

Date