

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 734095

Entity Name: THE TOWNHOMES OF ORIOLE ASSOCIATION, INC.

Current Principal Place of Business:

C/O EXCLUSIVE PROPERTY MANAGEMENT
2945 WEST CYPRESS CREEK ROAD SUITE 201
FT. LAUDERDALE , FL 33309

Current Mailing Address:

C/O EXCLUSIVE PROPERTY MANAGEMENT
2945 WEST CYPRESS CREEK ROAD SUITE 201
FT. LAUDERDALE , FL 33309 US

FEI Number: 59-1724549

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS LAW GROUP, P.A.
301 W PLATT STREET, #375
TAMPA, FL 33606 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

Officer/Director Detail :

Title PRESIDENT
Name CATALAN, WANDA
Address C/O EXCLUSIVE PROPERTY
 MANAGEMENT
 2945 WEST CYPRESS CREEK ROAD
 SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33309

Title VP
Name RODIER, CINDEE
Address C/O EXCLUSIVE PROPERTY
 MANAGEMENT
 2945 WEST CYPRESS CREEK ROAD
 SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33309

Title SECRETARY
Name BAPTISTE, SANDRA
Address C/O EXCLUSIVE PROPERTY
 MANAGEMENT
 2945 WEST CYPRESS CREEK ROAD
 SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33309

Title TREASURER
Name FRANKLIN, ANGELA
Address C/O EXCLUSIVE PROPERTY
 MANAGEMENT
 2945 WEST CYPRESS CREEK ROAD
 SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33309

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: WANDA CATALAN

PRESIDENT

09/08/2016

Electronic Signature of Signing Officer/Director Detail

Date