

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757097

**FILED
Mar 31, 2014
Secretary of State
CC2282584925**

Entity Name: OLIVELEAF CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5190 LAS VERDES CR.
DELRAY BEACH, FL 33484

Current Mailing Address:

100 E. LINTON BLVD., #406B
DELRAY BEACH, FL 33483 US

FEI Number: 59-2088171

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALLUP ACCOUNTING
100 E. LINTON BLVD., #406B
DELRAY BEACH, FL 33483 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: DIANA HURLEY

03/31/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name KLEIMAN, SOL
Address 5190 LAS VERDES CIRCLE #202
City-State-Zip: DELRAY BEACH FL 33484

Title PD
Name BERARDI, NICK
Address 5190 LAS VERDES CIRCLE #112
City-State-Zip: DELRAY BEACH FL 33484

Title TD
Name SCHWARTZ, HARVEY
Address 5190 LAS VERDES CIRCLE #221
City-State-Zip: DELRAY BEACH FL 33484

Title VPD
Name CARVAJAL, BLANCA
Address 5190 LAS VERDES CR., #212
City-State-Zip: DELRAY BEACH FL 33484

Title D
Name KLEIMAN, SOLOMON
Address 5190 LAS VERDES CR., #202
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name CLAUDIO, ALFREDO
Address 5190 LAS VERDES CR. #102
City-State-Zip: DELRAY BEACH FL 33484

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: NICK BERARDI

PRESIDENT

03/31/2014

Electronic Signature of Signing Officer/Director Detail

Date