

**2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N05000007213

**Entity Name:** ORCHID RESERVE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Nov 22, 2016**  
**Secretary of State**  
**CC9896572132**

**Current Principal Place of Business:**

UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
CORAL SPRINGS, FL 33065 US

**FEI Number: 55-0903992**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LEVINE, SCOTT J. ESQ.  
BROUGH, CHADROW & LEVINE, P.A.  
2149 NORTH COMMERCE PARKWAY WESTON PROFESSIONAL CENTRE  
WESTON, FL 33326 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: SCOTT J. LEVINE ESQ.**

**11/22/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name GLADSTONE, FRED  
Address UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title VPD  
Name STOLLER, RICHARD  
Address UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title D  
Name TEITLER, MAXINE  
Address UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title S  
Name KIMMERMAN, PHYLIS  
Address UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title D  
Name SCHWARZ, MARION  
Address UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title T  
Name CARLIN, MADELINE  
Address UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
City-State-Zip: CORAL SPRINGS FL 33065

Title D  
Name FASSLER, JAMES  
Address UNITED COMMUNITY MANAGEMENT CORP.  
11784 WEST SAMPLE ROAD 103  
City-State-Zip: CORAL SPRINGS FL 33065

*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: FRED GLADSTONE**

**P**

**11/22/2016**

