

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14078

Entity Name: TOWNHOMES AT ORANGE DRIVE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4251 SW 70TH TERR
DAVIE, FL 33314**Current Mailing Address:**4251 SW 70TH TERR
DAVIE, FL 33314**FEI Number: 59-2695211****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
625 NORTH FLAGLER DRIVE
7TH FLOOR
WEST PALM BEACH, FL 33401 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	PD
Name	FRIEDMAN, JUDITH
Address	7120 SW 42 PLACE
City-State-Zip:	DAVIE FL 33314

Title	SECRETARY
Name	ELAINE, MURPHY
Address	4420 S.W 70TH TERRACE
City-State-Zip:	DAVIE FL 33314

Title	VP, DIRECTOR
Name	EMERSON, CHARLOTTE
Address	4210 SW 70 TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33314

Title	TREASURER
Name	SALINAS, MANUEL
Address	4305 SW 70 TERRACE
City-State-Zip:	DAVIE FL 33314

Title	DIRECTOR
Name	PATRICIA, PETRAGNANI
Address	4438 SW 70TH TERR
City-State-Zip:	DAVIE FL 33314

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: JUDITH FRIEDMAN**PRESIDENT****02/25/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date