2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 324927

Name:

Address: City-St-Zip: LEVY, JOANN

5801 CONGRESS AVE., STE 200

BOCA RATON, FL 33487

Entity Name: ORIOLE HOMES CORP.

FILED Apr 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5801 CONGRESS AVE., STE 200 BOCA RATON, FL 33487 **Current Mailing Address: New Mailing Address:** 5801 CONGRESS AVE., STE 200 BOCA RATON, FL 33487 FEI Number: 59-1228702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEVY, HARRY A 5801 CONGRESS AVE. SUITE 200 BOCA RATON, FL 33487 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LEVY, R D Name: Name: 5801 CONGRESS AVE., STE 200 Address: Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: Title: Title: SD () Delete () Change () Addition Name: LEVY, HA Name: 5801 CONGRESS AVE., STE 200 Address: Address: BOCA RATON, FL 33487 City-St-Zip: City-St-Zip: Title: Title: PD () Delete () Change () Addition LEVY, MARK A Name: Name: 5801 CONGRESS AVE., STE 200 Address: Address: BOCA RATON, FL 33487 City-St-Zip: City-St-Zip: Title: VD () Delete Title: () Change () Addition LEVY, JOEL Name: Name: Address: 5801 CONGRESS AVE., STE 200 Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: Title: VD (X) Delete Title:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: HARRY A LEVY SD 04/09/2008

() Change () Addition