2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723811

FILED Feb 18, 2009 Secretary of State

Entity Name: ORIOLE CONDOMINIUM ONE CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 7777 GOLF CIRCLE DRIVE MARGATE, FL 33063 **Current Mailing Address: New Mailing Address:** 7777 GOLF CIRCLE DRIVE MARGATE, FL 33063 FEI Number: 59-1572590 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: IRWIN, RICHARD 7777 GOLF CIRCLE DRIVE MARGATE, FL 33063 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MIMEAULT, CHRIS Name: Name: Address: 7787 GOLF CIRCLE DRIVE #312 Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: Title: () Delete Title: () Change () Addition GOLDBERG, CHARLES Name: Name: Address: 7877 GOLF CIRCLE DRIVE #210 Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: Title: () Delete Title: () Change () Addition LANE, JANE Name: Name: 7897 GOLF CIRCLE DRIVE #111 Address: Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: Title: () Delete Title: () Change () Addition Name: IRWIN, RICHARD Name: 7787 GOLF CIRCLE DRIVE #203 Address: Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: Title: () Delete Title: () Change (X) Addition SEVELOVITZ, HERMAN Name: Name: 7787 GOLF CIRCLE DRIVE # 110 Address: Address: City-St-Zip: City-St-Zip: MARGATE, FL 33063

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD IRWIN P 02/18/2009