


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # 724988 1. Entity Name ORIOLE GOLF & TENNIS CLUB CONDOMINIUM ONE C ASSOCIATION, INC.	
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Principal Place of Business C ASSOCIATION, INC. 7857 GOLF CIRCLE DR. MARGATE FL 33063	Mailing Address 7777 GOLF CIRCLE DRIVE MARGATE FL 33063
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address	4. FEI Number 59-1529232	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State	City & State	6. Name and Address of Current Registered Agent	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent KULLER, SHIRLEY 7857 GOLF CIRCLE DR APT 112 MARGATE FL 33063	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">TD KULLER, SHIRLEY 7857 GOLF CIR.DR. #112 MARGATE FL 33063</td> <td style="width: 50%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>P WARNER, MARGARET 7857 GOLF CIRCLE DR. #312 MARGATE FL 33063</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>SD BERNSTEIN, ADRIENNE 7857 GOLF CIRCLE DR. #307 POMPANO BEACH FL 33063</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>DVP BOBBI, ELAINE C 7857 GOLF CIRCLE DR. #309 MARGATE FL 33063</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D SEGARRA, ARMANDO 7857 GOLF CIRCLE DR. #311 MARGATE FL 33063</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>D PEET, ROBERT 7857 GOLF CIRCLE DRIVE MARGATE FL 33063</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table>	TD KULLER, SHIRLEY 7857 GOLF CIR.DR. #112 MARGATE FL 33063	<input type="checkbox"/> Delete	P WARNER, MARGARET 7857 GOLF CIRCLE DR. #312 MARGATE FL 33063	<input type="checkbox"/> Delete	SD BERNSTEIN, ADRIENNE 7857 GOLF CIRCLE DR. #307 POMPANO BEACH FL 33063	<input type="checkbox"/> Delete	DVP BOBBI, ELAINE C 7857 GOLF CIRCLE DR. #309 MARGATE FL 33063	<input type="checkbox"/> Delete	D SEGARRA, ARMANDO 7857 GOLF CIRCLE DR. #311 MARGATE FL 33063	<input type="checkbox"/> Delete	D PEET, ROBERT 7857 GOLF CIRCLE DRIVE MARGATE FL 33063	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="text-align: center;">U00000725168</td> <td></td> </tr> <tr> <td style="text-align: center;">05/03/07-80011-015 61.25</td> <td></td> </tr> </table>		<input type="checkbox"/> Change <input type="checkbox"/> Addition	U00000725168		05/03/07-80011-015 61.25	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Margaret Warner President 3-11-07