2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746714

FILED Feb 27, 2009 Secretary of State

Entity Name: ORCHID OAKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ARGUS PROPERTY MANAGEMENT 2477 STICKNEY POINT RD SUITE 118A SARASOTA, FL 34231 US

Current Mailing Address: New Mailing Address:

C/O ARGUS PROPERTY MANAGEMENT 2477 STICKNEY POINT RD SUITE 118A SARASOTA, FL 34231 US

FEI Number: 59-2132585 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:

ARGUS PROPERTY MANAGEMENT 2477 STICKNEY POINT RD, SUITE 118A SARASOTA, FL 34231 US

OFFICERS AND DIRECTORS:

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

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 TD () Delete
 Title:
 D (X) Change () Addition

 Name:
 LA FLAME, JAMES
 Name:
 LA FLAME, JAMES

 Address:
 2737 ORCHID OAKS DR #303B
 Address:
 2737 ORCHID OAKS DR #303B

 City-St-Zip:
 SARASOTA, FL 34239
 City-St-Zip:
 SARASOTA, FL 34239

Title: D () Delete Title: TD (X) Change () Addition

Name: STANIS, BRIAN Name: MASTERS, TERRI

 Address:
 2741 ORCHID OAKS DR #105B
 Address:
 2723 ORCHID OAKS DR #104C

 City-St-Zip:
 SARASOTA, FL 34239
 City-St-Zip:
 SARASOTA, FL 34239

Title: S () Delete Title: () Change () Addition

 Name:
 MESTER, MARLENE
 Name:

 Address:
 2758 ORCHID OAKS DR #305A
 Address:

 City-St-Zip:
 SARASOTA, FL 34239
 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition Name: AMARAL, EUGENE Name: CULLERS, NORWOOD Address: 2710 ORCHID OAKS DR, #104D Address: 2726ORCHID OAKS DR, #105C

City-St-Zip: SARASOTA, FL 34239 City-St-Zip: SARASOTA, FL 34239

Title: VP () Delete Title: () Change () Addition

 Name:
 PLUMLEE, STEPHEN
 Name:

 Address:
 2714 ORCHID OAKS DRIVE #101C
 Address:

 City-St-Zip:
 SARASOTA, FL 34239
 City-St-Zip:

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: NORWOOD CULLERS PD 02/27/2009