

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750469

FILED
Mar 20, 2009
Secretary of State

Entity Name: OLIVEWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2450 NORTHEAST 15TH AVENUE
FT. LAUDERDALE, FL 33305

New Principal Place of Business:

Current Mailing Address:

2450 NORTHEAST 15TH AVENUE
FT. LAUDERDALE, FL 33305

New Mailing Address:

FEI Number: 59-2086114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWNS, JOHN C., CPA
1881 N UNIVERSITY DRIVE STE 107
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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:

Title: T () Delete
Name: PASSARELL, DAVID
Address: 2450 NE 15 AVE #101
City-St-Zip: WILTON MANORS, FL

Title: VPD () Delete
Name: STASI, LAURA
Address: 2450 NE 15 AVE #206
City-St-Zip: WILTON MANORS, FL 33305

Title: P () Delete
Name: WILLIAMSON, MICHAEL
Address: 2450 NE 15 AVE #208
City-St-Zip: WILTON MANORS, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DAVID PASSARELL

T

03/20/2009

Electronic Signature of Signing Officer or Director

Date