


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 23, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 753767</b> 1. Entity Name ORA AT MELBOURNE BEACH, INC.	
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Principal Place of Business ORA AT MELBOURNE BEACH INC 210 GALAXY LANE MELBOURNE BCH, FL 32951	Mailing Address 210 GALAXY LN. MELBOURNE BCH, FL 32951
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**DO NOT WRITE IN THIS SPACE**



02012007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2023599	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

A VAN, CATTERTON JR,P.A.  
 1990 WEST NEW HAVEN AVE  
 SUITE 104  
 MELBOURNE, FL 32902-1598

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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 \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

000000677217  
 03/30/07-80095-019 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANTHONY, KORRIE 4112 ONIEDA ST NEW HARTFORD, NY 13413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAMS, CHARLES 6213 131ST SAUGATUCK, MI 49453
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAY, JIM GRAY WOLF LANE HENDERSONVILLE, NC 28792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOSMAN, WAYNE 10 FARM CIR WATERTOWN, CT 06795
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALDRY, GARY 572 CEDAR PARK LN RR#1 ATHENS ONTARIO, CA KOE 1B0
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRUZINA, JAMES 236 PIER LANE MELBOURNE BEACH, FL 32951

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** James E. Day James E. Day 2/8/07 (321) 724-6056  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #