




2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90313 022 ****70.00

DOCUMENT # 756387			
1. Entity Name THE OFFICE VILLAGE CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 598 TIGERTAIL CT MARCO ISLAND, FL 34145 US		Mailing Address 598 TIGERTAIL CT MARCO ISLAND, FL 34145 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2395163		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ADAMS, KAY GARBUTT 598 TIGERTAIL CT MARCO ISLAND, FL 34145		Name <u>Ricardo Russi</u> Street Address (P.O. Box Number is Not Acceptable) <u>3100 NW 72 Ave #125</u> City <u>MIAMI</u> FL Zip Code <u>33122</u>	
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 		DATE <u>2/25/05</u>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$61.25 Due by May 1, 2005		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			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SUTTON, JOHN 7721 SW 62 AVENUE MIAMI, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Jose Rodriguez-Capero <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7701 SW 62 Ave #100 South Miami FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARLIN, ROBERT 7701 SW 62 AVE #101 MIAMI, FL 33143 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Richard Anderson <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7751 SW 62 Ave #200 South Miami FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ADAMS, KAY GARBUTT 598 TIGERTAIL CT MARCO ISLAND, FL 34145 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Kimber Mariani <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7741 SW 62 Ave South Miami FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FISHER, EDWARD 7711 SW 62 AVE. #101 MIAMI, FL 33143 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 		DATE: <u>2/25/05</u> DAYTIME PHONE #: <u>3056674075</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	