


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

**FILED**  
**Feb 20, 2007 8:00 am**  
**Secretary of State**

02-20-2007 90038 016 \*\*\*\*61.25

**DOCUMENT # 811022**

1. Entity Name  
**ORLEANS CHATEAU AND VILLAS INC.**



Principal Place of Business  
**C/O PATRICK G. KELLY**  
**10226 N.W. 47 STREET**  
**SUNRISE, FL 33351**

Mailing Address  
**1401 E BROWARD**  
**206**  
**FORT LAUDERDALE, FL 33301**

2. Principal Place of Business - No P.O. Box #  
*2000 S. Ocean Ln*  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
*Fort Lauderdale, FL*

City & State  
 City & State

Zip  
*33316*

Country  
*Florida*



01042007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-0790085**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

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

**KELLY, PATRICK G**  
**1401 E BROWARD BLVD**  
**FORT LAUDERDALE, FL 33301**

**7. Name and Address of New Registered Agent**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City  
**FL** Zip Code

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**

**Make check payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>✓</del> Delete GILLETTE, DENNIS 2000 S. OCEAN LANE #602 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>✓</del> Delete MOODY, LESTER E 2000 S. OCEAN LANE #603 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete TS PENISTEN, GARY D 2000 S. OCEAN LANE #4 FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <del>Director</del> MONTALBANO, PATRICIA 2000 S. OCEAN LANE #6 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete D MAUS, JUDY 2000 S OCEAN LN #502 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete VP Schenkel, David 2000 S. Ocean Lane, #204 Ft. Lauderdale, FL 33316

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition P Virginia Moody 2000 S. OCEAN LN #603 FT LAUDERDALE, FL 33316
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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D Montalbano, Patricia 2000 S. Ocean Lane, #6 Ft. Lauderdale, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D Maus, Judy 2000 S. Ocean Lane, #502 Ft. Lauderdale, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP Schenkel, David 2000 S. Ocean Lane, #204 Ft. Lauderdale, FL 33316

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 any other like empowered.

SIGNATURE: *G.D. Penisten* Date: 2/8/07 Daytime Phone # \_\_\_\_\_