

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

03-27-2001 90025 037 ****61.25

DOCUMENT # N00000001759

1. Entity Name

O.R. CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

14650 FEDERAL HIGHWAY
JUNO BEACH FL 33408

14650 FEDERAL HIGHWAY
JUNO BEACH FL 33408

2. Principal Place of Business

3. Mailing Address

400 Toney Penna Drive

400 Toney Penna Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jupiter, FL

City & State

Jupiter, FL

4. FEI Number

650992037

Applied For

Not Applicable

Zip

33458

Country

USA

Zip

33458

Country

USA

5. Certificate of Status Desired

Not Applicable

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHOEMAKER, JOHN B
503 N. ORLANDO AVENUE
SUITE 105
COCOA BEACH FL 32931

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

Not Applicable

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D [X] Delete
NAME KODSI, JOSEPH
STREET ADDRESS 1499 W. PALMETTO PARK ROAD #200
CITY-ST-ZIP BOCA RATON FL 33486

TITLE PD [] Change [X] Addition
NAME KODSI, ALBERT- c/o Parc Royal Home
STREET ADDRESS 4432 Parkway Commerce Blvd.
CITY-ST-ZIP Orlando, FL 32808

TITLE D [X] Delete
NAME KODSI, DANIEL
STREET ADDRESS 1499 W. PALMETTO PARK ROAD #200
CITY-ST-ZIP BOCA RATON FL 33486

TITLE D [] Change [X] Addition
NAME GINDIN, PETER
STREET ADDRESS 750 Ocean Royale Way -- 704-N
CITY-ST-ZIP Juno Beach, FL 33408

TITLE D [] Delete
NAME SHOEMAKER, JOHN B
STREET ADDRESS 503 N. ORLANDO AVENUE #105
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE SD [X] Change [] Addition

TITLE [] Delete

TITLE [] Change [] Addition

TITLE [] Delete

TITLE [] Change [] Addition

TITLE [] Delete

TITLE [] Change [] 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MANFRED G. DANWER

Date

Daytime Phone #

3-13-01 561-747-5305

032E037 (10/00)