## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000002596

FILED Jan 22, 2008 Secretary of State

Entity Name: FLAMINGO COMMONS OFFICE PARK ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

12401 ORANGE DRIVE SUITE 100 DAVIE, FL 33330 US

Current Mailing Address: New Mailing Address:

12401 ORANGE DRIVE SUITE 100 DAVIE, FL 33330 US

FEI Number: 65-1080258 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ZIMMERMAN, HOWARD J ORLOVE, L. MICHAEL 12401 ORANGE DRIVE 12401 ORANGE DRIVE SUITE 100 SUITE 100 DAVIE, FL 33330 US DAVIE, FL 33330 US

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.

in the State of Florida.

SIGNATURE: L. MICHAEL ORLOVE 01/22/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 ( ) Delete
 Title:
 PD
 ( X) Change ( ) Addition

 Name:
 ZIMMERMAN, HOWARD J
 Name:
 ORLOVE, L. MICHAEL

 Address:
 13551 S.W. 34 COURT
 Address:
 2600 ISLAND BLVD. PH#2

 City-St-Zip:
 DAVIE, FL 33330 US
 City-St-Zip:
 AVENTURA, FL 33160 US

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ORSI, RAYMOND F
 Name:

 Address:
 4007 PALM PLACE
 Address:

 City-St-Zip:
 WESTON, FL 33331 US
 City-St-Zip:

Title: STD () Delete Title: () Change () Addition

 Name:
 MATOS, FRED S
 Name:

 Address:
 20421 N.W. 4 STREET
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33029
 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: L. MICHAEL ORLOVE P/D 01/22/2008