

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003363

FILED
Mar 27, 2007
Secretary of State

Entity Name: OLYMPIA PUD PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1060 KEENE ROAD
DUNEDIN, FL 34698

New Principal Place of Business:

100 MAIN STREET
SUITE 206
SAFETY HARBOR, FL 34695

Current Mailing Address:

1060 KEENE ROAD
DUNEDIN, FL 34698

New Mailing Address:

100 MAIN STREET
SUITE 206
SAFETY HARBOR, FL 34695

FEI Number: 59-3737658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOULOU MIS, GEORGE E
1060 KEENE ROAD
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

TOULOU MIS, GEORGE E
100 MAIN STREET
SUITE 206
SAFETY HARBOR, FL 34695 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.

SIGNATURE:

03/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ENTREKEN, T. EDWARD
Address: 1060 KEENE ROAD
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: TOULOU MIS, STATHY
Address: 1060 KEENE ROAD
City-St-Zip: DUNEDIN, FL 34698

Title: DVPS (X) Delete
Name: SIANDRIS, ANESTIS
Address: 1060 KEENE ROAD
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ENTREKEN, T. EDWARD
Address: 100 MAIN STREET - SUITE 206
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D (X) Change () Addition
Name: TOULOU MIS, STATHY
Address: 100 MAIN STREET - SUITE 206
City-St-Zip: SAFETY HARBOR, FL 34695

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ENTREKEN T EDWARD

DP

03/27/2007

Electronic Signature of Signing Officer or Director

Date