

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004476

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: ORANGE PARC CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3051 ORANGE STREET  
COCONUT GROVE, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

3051 ORANGE STREET  
COCONUT GROVE, FL 33133 US

**New Mailing Address:**

FEI Number: 03-0653714

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHOLAK, PAUL M  
3051 ORANGE STREET  
COCONUT GROVE, FL 33133 US

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

GOLDNER, MICHAEL B  
3051 ORANGE STREET  
COCONUT GROVE, FL 33133 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: MICHAEL GOLDNER

01/07/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PROPPER, SHIRLEY  
Address: 3051 ORANGE STREET  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VPD ( ) Delete  
Name: COOKS, IVORY  
Address: 3053 ORANGE STREET  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: SD ( ) Delete  
Name: COOKS, IVORY  
Address: 3400 MAIN HIGHWAY  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: TD ( ) Delete  
Name: CHOLAK, PAUL M  
Address: 3051 ORANGE STREET  
City-St-Zip: COCONUT GROVE, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GOLDNER, NICOLE  
Address: 3051 ORANGE STREET  
City-St-Zip: COCONUT GROVE, FL 33133 US

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

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

Title: TD (X) Change ( ) Addition  
Name: GOLDNER, MICHAEL B  
Address: 3051 ORANGE STREET  
City-St-Zip: COCONUT GROVE, FL 33133

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: MICHAEL GOLDNER

TD

01/07/2008

Electronic Signature of Signing Officer or Director

Date