

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005177

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** ORANGE BLOSSOM MALL PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

4146 OKEECHOBEE RD.  
FT. PIERCE, FL 34947

**New Principal Place of Business:**

**Current Mailing Address:**

4300 OKEECHOBEE ROAD  
FORT PIERCE, FL 34947

**New Mailing Address:**

**FEI Number:** 65-1146268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHEN, STEPHEN M  
4500 PGA BLVD.  
STE 104  
PALM BEACH GARDENS, FL 33418 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** BARGERON, TIM  
**Address:** 4300 OKEECHOBEE RD  
**City-St-Zip:** FORT PIERCE, FL 34947 US

**Title:** PTD  
**Name:** PERNA, JOHN V  
**Address:** 529 FIFTH AVENUE  
**City-St-Zip:** NEW YORK, NY 10017 US

**Title:** D  
**Name:** COHEN, STEPHEN M  
**Address:** 4500 PGA BOULEVARD, SUITE 104  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418 US

I hereby 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 all other like empowered.

**SIGNATURE:** STEPHEN M. COHEN

D

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date