2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006785

FILED Jun 25, 2009 Secretary of State

Entity Name: OMEGA APARTMENTS RESIDENT ASSOCIATION INC.

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

2811 GAMMA DR. ORLANDO, FL 32810

Current Mailing Address: New Mailing Address:

2811 GAMMA DR. ORLANDO, FL 32810

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ROJAS, MANUEL CAMPBELL, CAMERON 7480 KAPPA COURT 7412KAPPA COURT ORLANDO, FL 32810 US ORLANDO, FL 32810 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: CAMERON CAMPBELL 06/25/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 ROJAS, MANUEL
 Name:
 CAMPBELL, CAMERON

 Address:
 7480 KAPPA CT.
 Address:
 7412 KAPPA CT.

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 ORLANDO, FL 32810

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

 Name:
 LYNAM, HERBERT
 Name:
 WASHINGTON, DANA

 Address:
 2559 GAMMA DRIVE
 Address:
 7452 KAPPA COURT

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 ORLANDO, FL 32810

Title: T () Delete Title: S (X) Change () Addition

 Name:
 CAMPBELL, CAMERON
 Name:
 MILLER, TIFFANY

 Address:
 7404 KAPPA COURT
 Address:
 7478 SIGMA COURT

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 ORLANDO, FL 32810

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

 Name:
 Name:
 JORDAN, TANZANIA

 Address:
 Address:
 7436 KAPPA COURT

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32810

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: CAMERON CAMPBELL P 06/25/2009