


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90050 017 ****61.25

DOCUMENT # N03000002066					
1. Entity Name 3100 OPPORTUNITY COURT CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3100 OPPORTUNITY CT S DAYTONA, FL 32119			Mailing Address 200 E GRANADA BLVD STE 200 ORMOND BCH, FL 32176		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-0177704	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SELBY, DWIGHT SELBY REALTY, INC. 200 E. GRANADA BLVD #200 ORMOND BEACH, FL 32176			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DP	<input type="checkbox"/> Delete	TITLE	D P T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SELBY, DWIGHT		NAME		
STREET ADDRESS	200 E GRANADA BLVD STE 200		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BCH, FL 32176		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, SANFORD		NAME		
STREET ADDRESS	125 BASIN ST STE 210		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BCH, FL 32114		CITY-ST-ZIP		
TITLE	DT	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DARGAN, THOMAS		NAME		
STREET ADDRESS	444 SEABREEZE BLVD STE 100		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BCH, FL 32118		CITY-ST-ZIP		
TITLE	DS	<input checked="" type="checkbox"/> Delete	TITLE	DVP S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STRASSER, CHARLES		NAME		
STREET ADDRESS	1042 N US HWY 1		STREET ADDRESS	3100 S. Ridgewood Ave. #100	
CITY-ST-ZIP	ORMOND BCH, FL 32174		CITY-ST-ZIP	South Daytona FL 32219	
TITLE	DV	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SACKS, DAVID		NAME		
STREET ADDRESS	240 SEAGRAVE ST		STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BCH, FL 32114		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Robert Boone	
STREET ADDRESS			STREET ADDRESS	4255 S. Pipkin Road	
CITY-ST-ZIP			CITY-ST-ZIP	Lakeland FL 33811	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____			4-15-08 (386)238-4456		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		