

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006117

FILED
May 01, 2007
Secretary of State

Entity Name: ORANGE BRANCH BAY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

12001 SCIENCE DRIVE - SUITE 160
ORLANDO, FL 32826

New Principal Place of Business:

8009 SOUTH ORANGE AVENUE
ORLANDO, FL 32809

Current Mailing Address:

8009 SOUTH ORANGE AVENUE
ORLANDO, FL 38309

New Mailing Address:

FEI Number: 74-3121503 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

MITCHEM, WILLIAM R
11875 HIGH TECH AVENUE
SUITE 100A
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: BARBARA A. BURKE

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MITCHEM, WILLIAM R
Address: 11875 HIGH TECH AVENUE, SUITE 100A
City-St-Zip: ORLANDO, FL 32817

Title: DVP () Delete
Name: WOFFORD, KEN
Address: 11875 HIGH TECH AVENUE, SUITE 100A
City-St-Zip: ORLANDO, FL 32817

Title: DST () Delete
Name: KIRWAN, GLENN
Address: 12001 SCIENCE DRIVE, SUITE 160
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MITCHEM, WILLIAM R
Address: 6905 N. WICKHAM ROAD, SUITE 401
City-St-Zip: MELBOURNE, FL 32940

Title: DVP (X) Change () Addition
Name: WOFFORD, KEN
Address: 6905 N. WICKHAM ROAD, SUITE 401
City-St-Zip: MELBOURNE, FL 32940

Title: DST (X) Change () Addition
Name: KIRWAN, GLENN
Address: 6905 N. WICKHAM ROAD, SUITE 401
City-St-Zip: MELBOURNE, FL 32940

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: WILLIAM MITCHEM

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date