## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000008320

FILED May 06, 2008 Secretary of State

Entity Name: ORCHID & MEAD GARDEN TOWNHOMES ASSOCIATION, INC.

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

2180 WEST SR 434 1000 HOLT AVENUE

SUITE 5000 WINTER PARK, FL 32789 US

LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 1000 HOLT AVENUE

SUITE 5000 WINTER PARK, FL 32789 US LONGWOOD, FL 32779 US

FEI Number: 20-5689419 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: Name and Address of New Registered Agent:

HERBST, GEORGE H 1000 HOLT AVENUE

WINTER PARK, FL 32789 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: GEORGE H HERBST 05/06/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: SUBRATI, MOHAMED K Name: HERBST, GEORGE H
Address: 84-44 104 STREET Address: 1000 HOLT AVENUE

City-St-Zip: RICHMOND HILLS, NY 11418 US City-St-Zip: WINTER PARK, FL 32789 US

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

 Name:
 SUBRATI, BIBIS
 Name:
 WELCH, KATHLEEN

 Address:
 84-44 104 STREET
 Address:
 1000 HOLT AVENUE

City-St-Zip: RICHMOND HILLS, NY 11418 US City-St-Zip: WINTER PARK, FL 32789 US

 $\label{eq:title:equation:title:v} {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$ 

Name: SUBRATI, RAHMAN Name: BITIKOFER, SCOTT Address: 84-44 104 STREET Address: 1000 HOLT AVENUE

City-St-Zip: RICHMOND HILLS, NY 11418 US City-St-Zip: WINTER PARK, FL 32789 US

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: GEORGE H. HERBST P 05/06/2008