

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N05000011362

1. Entity Name
ORCHID COMMONS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
12490 RIVERSIDE AVENUE
FORT MYERS, FL 33919

Mailing Address
12490 RIVERSIDE AVENUE
FORT MYERS, FL 33919

2. Principal Place of Business - No P.O. Box #

3. Mailing Address
P.O. Box 100831

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Cape Coral, FL

Zip

Zip
33910

Country
USA

02142007 Chg-NP CR2E037 (12/06)

4. FEI Number
20-4352824

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEVIC, BOZIDAR
12490 RIVERS DR
FORT MYERS, FL 33919

Name George Tcapue

Street Address (P.O. Box Number is Not Acceptable)

2503 Del Prado Blvd. #500
Cape Coral, FL 33904

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.

2-14-07

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. \$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 D Delete
NAME DEVIC, BOZIDAR
STREET ADDRESS 12490 RIVERSIDE DR
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE President Change Addition
NAME Jason TRAMONTE
STREET ADDRESS 1625 SE 46th STREET
CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE D Delete
NAME DEVIC, RENEE
STREET ADDRESS 12490 RIVERSIDE AVENUE
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE Vice President Change Addition
NAME STEVE KRIEG
STREET ADDRESS 1625 SE 46th Street
CITY-ST-ZIP Cape Coral, FL 33904

TITLE D Delete
NAME DEVIC, YANNICK
STREET ADDRESS 12490 RIVERSIDE AVENUE
CITY-ST-ZIP FORT MYERS, FL 33919

TITLE Secretary/Treasurer Change Addition
NAME John BIFFAR, Audrey NIESSEN Agent
STREET ADDRESS 1625 SE 46th St.
CITY-ST-ZIP Cape Coral, FL 33904

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #