

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012478

FILED
Apr 19, 2009
Secretary of State

Entity Name: ORCHID PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O 39 BRIGHTON AVENUE
BOSTON, MA 02134

New Principal Place of Business:

415 3RD AVE. S.
NAPLES, FL 34102

Current Mailing Address:

C/O 39 BRIGHTON AVENUE
BOSTON, MA 02134

New Mailing Address:

792 94 AVE. N.
NAPLES, FL 34108

FEI Number: 02-0761422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEFFY, JANE YEAGER ESQ.
2375 TAMiami TRAIL NORTH
SUITE 310
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

PUTNAM, DAVID C
792 94 AVE. N.
NAPLES, FL 34108 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: DAVID PUTNAM

04/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BERK, JAMES
Address: C/O 39 BRIGHTON AVENUE
City-St-Zip: BOSTON, MA 02134

Title: VPD () Delete
Name: SCHEINHOLZ, ARTHUR
Address: C/O 39 BRIGHTON AVENUE
City-St-Zip: BOSTON, MA 02134

Title: STD () Delete
Name: DARER, ENRIQUE
Address: C/O 39 BRIGHTON AVENUE
City-St-Zip: BOSTON, MA 02134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: WHITING, DAVID
Address: 415 3RD AVE. S.
City-St-Zip: NAPLES, FL 34102

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES BERK

P

04/19/2009

Electronic Signature of Signing Officer or Director

Date