2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2007
Secretary of State

DOCUMENT# N06000003616

Entity Name: OAKGLEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

901 SE 17TH STREET SUITE 206
FT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

901 SE 17TH STREET SUITE 206
FT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 20-4622699 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

MITTELMAN, ANDREW L
901 SE 17TH STREET SUITE 206
FT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MITTELMAN, ANDREW L
Address: 901 SE 17TH STREET SUITE 206
City-St-Zip: FT LAUDERDALE, FL 33316

Title: VPD ( ) Delete
Name: MARTIN, KEVIN
Address: 901 SE 17TH STREET SUITE 206
City-St-Zip: FT LAUDERDALE, FL 33316

Title: SD ( ) Delete
Name: PINARD, THOMAS
Address: 901 SE 17TH STREET SUITE 206
City-St-Zip: FT LAUDERDALE, FL 33316

Title: TD (X) Delete
Name: MITTELMAN, ANDREW L
Address: 901 SE 17TH STREET SUITE 206
City-St-Zip: FT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change ( ) Addition
Name: PINARD, THOMAS
Address: 901 SE 17TH STREET SUITE 206
City-St-Zip: FT LAUDERDALE, FL 33316

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: ANDREW L MITTELMAN PD 05/15/2007

Electronic Signature of Signing Officer or Director — Date