2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2008 8:00 am Secretary of State

DOCUMENT # N0600005758 1. Entity Name TOWNHOMES AT OLEANDER CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address							05-01-200	8 90235 012 **	***61.25
Principal Place 437 N. OLEA DAYTONA BO	ANDER AVE.		Mailing Address 437 N. OLEANDER DAYTONA BCH, FL					Tir aski salsi billi ksasi	8378 i 182118 i C i a tu i
2. Principal F	Place of Busi	ness - No P.O. Box #	3. Mailing Address TOUNDONES AT OLEANDER						
Suite, Apt. #, etc.			Suite, Apt. # etc. P. D. Box 1527			04162008	Chg-NP	CR2E037 (12	(06)
City & State			ORMOND BEACH, FL		H, FL	4. FEI Numbe	, <i>20-44</i> 5 → FOR	4252	Applied For Not Applicable
Zìp		Country	32175	Cou	ntry		of Status Desired	Fee Re	5 Additional equired
	6. Name	and Address of Current F	Registered Agent		<u> </u>	7. Name and	Address of New	Registered Agent	-
MURPHY, MICHAEL PI 2570 OCEAN SHORE BLVD., UNIT 20 ORMOND BCH, FL 32176					Name WAY'NE BALDWIN Street Address (P.O. Box Number is Not Acceptable) 437 NOLEANDER AVE #1				
					GDAYTOR	on Beac	h	FL Zip	Code 2118
		ty submits this statement for tered agent.	the purpose of changin	g its registere	ed office or registe	ered agent, or both	h, in the State of F	Torida. I am familiar	with, and accept
SIGNATURE	Signature, types	d or printed name of registered agent a	nd title if applicable.	(NOTE: Registered	d Agent signature require	ed when reinstating)		4/23/08	<u> </u>
Filing Fee is \$61.25 Due by May 1, 2008									
	_	May 1, 2008	Trust Fu	Campaign Find Contributi	~ —	\$5.00 May 80 Added to Fees	Flo	Make check paya orida Department	of State
10.	Due by f		Trust Fu ECTORS		on. 🗆	Added to Fees ADDITIONS/CHA	Flo	orida Department ERS AND DIRECTO	of State RS IN 10
TITLE	Due by f	May 1, 2008 OFFICERS AND DIR	Trust Fu	nd Contributi	on.	Added to Fees ADDITIONS/CHA	FIG NGES TO OFFIC	orida Department	of State RS IN 10
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TITLE	Due by MURPHY 2750 OCI	May 1, 2008 OFFICERS AND DIR	Trust Fu	11. TITLE NAME	on. Pes Et ADDRESS	Added to Fees ADDITIONS/CHA SI de NT AUNE BO	FIGURES TO OFFICE ALDUIN EAUDER	orida Department ERS AND DIRECTO □ Ch	of State RS IN 10 ange Addilion
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by MURPHY 2750 OCI ORMONE D MURPHY	OFFICERS AND DIR (, MICHAEL H EAN SHORE BLVD., UN D BCH, FL 32176	Trust Fu ECTORS IF Delete IT 20	11. IIILE NAME STREE CITY- TITLE NAME	er ADDRESS ST-ZIP	Added to Fees ADDITIONS/CHA GI de nt AVNE BA AY TONA RES DOLLA	FIGURES TO OFFICE ALDWIN EANDER BEACH,	Fig. 32(1)	of State RS IN 10 ange
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