## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000007556

FILED Apr 29, 2008 Secretary of State

Entity Name: THE BUNGALOWS OF PORT ORANGE CONDOMINIUM ASSOCIATION, INC.

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

997 W. KENNEDY BLVD., SUITE A-25 5393 SHORELINE CIRCLE ORLANDO, FL 32810 SANFORD, FL 32771

Current Mailing Address: New Mailing Address:

997 W. KENNEDY BLVD.,SUITE A-25 5393 SHORELINE CIRCLE ORLANDO, FL 32810 SANFORD, FL 32771

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAVELLE, PATRICIA KOIVU, MARK

997 W. KENNEDY BLVD., SUITE A-25 53393 SHORELINE CIRCLE ORLANDO, FL 32810 US SANFORD, FL 32771 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: MARK KOIVU 04/29/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: VD (X) Change () Addition

Name: BIEWEND, ANDRE Name: KOIVU, WILLIAM

 Address:
 997 W. KENNEDY BLVD., SUITE A-25
 Address:
 5393 SHORELINE CIRCLE

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 SANFORD, FL 32771

Title: VD ( ) Delete Title: PD (X) Change ( ) Addition

Name: KOIVU, MARK Name: KOIVU, MARK

 Address:
 997 W. KENNEDY BLVD., SUITE A-25
 Address:
 5393 SHORELINE CIRCLE

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 SANFORD, FL 32771

Title: STVD ( ) Delete Title: STVD (X) Change ( ) Addition

 Name:
 LAVELLE, PATRICIA
 Name:
 MILLER, STEVE

 Address:
 997 W. KENNEDY BLVD., SUITE A-25
 Address:
 90 HIDDEN LAKE

 City-St-Zip:
 ORLANDO, FL 32810
 City-St-Zip:
 SANFORD, FL 32773

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: MARK KOIVU PD 04/29/2008