

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011904

FILED  
Feb 26, 2008  
Secretary of State

**Entity Name:** OVIEDO VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3361 ROUSE RD SUITE 235  
ORLANDO, FL 32817

**New Principal Place of Business:**

**Current Mailing Address:**

3361 ROUSE RD SUITE 235  
ORLANDO, FL 32817

**New Mailing Address:**

**FEI Number:** 26-1824446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOROVITZ, AARON J  
215 NORTH EOLA DRIVE  
ORLANDO, FL 32801 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: DEWITT, STEPHEN J  
Address: 3361 ROUSE RD SUITE 235  
City-St-Zip: ORLANDO, FL 32817

Title: VD ( ) Delete  
Name: GOROVITZ, AARON J  
Address: 215 NORTH EOLA DRIVE  
City-St-Zip: ORLANDO, FL 32801

Title: ST ( ) Delete  
Name: GOROVITZ, AARON  
Address: 215 NORTH EOLA DRIVE  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: DEWITT, JANET  
Address: 3361 ROUSE RD SUITE 235  
City-St-Zip: ORLANDO, FL 32817

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: STEPHEN J. DEWITT

PD

02/26/2008

Electronic Signature of Signing Officer or Director

Date