

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

07 APR 25 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Doc



04032007 Chg-NP CR2E037 (12/06)

DOCUMENT # N06000012290 1. Entity Name ORIONS POINT HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 2811-E INDUSTRIAL PLAZA DRIVE TALLAHASSEE, FL 32301			Mailing Address 2811-E INDUSTRIAL PLAZA DRIVE TALLAHASSEE, FL 32301		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THOMPSON, SUSAN S 3520 THOMASVILLE ROAD FOURTH FLOOR TALLAHASSEE, FL 32309			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
8. 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. I am familiar with, and accept the obligations of registered agent.			SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GHAZVINI, HOSSEIN 2811-E INDUSTRIAL PLAZA DRIVE TALLAHASSEE, FL 32301 <input type="checkbox"/> Delete		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GHAZVINI, BEHZAD 2811-E INDUSTRIAL PLAZA DRIVE TALLAHASSEE, FL 32301 <input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GHAZVINI, MEHRDAD 2811-E INDUSTRIAL PLAZA DRIVE TALLAHASSEE, FL 32301 <input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GHAZVINI, MEHRAN 2811-E INDUSTRIAL PLAZA DRIVE TALLAHASSEE, FL 32301 <input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i>			4-16-07		205-5231
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>