

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003930

FILED
Apr 30, 2008
Secretary of State

Entity Name: OLIVIA'S GARDEN CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

105 TRUXTON AVENUE
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

108 HAWKINS RD. UNIT D
FORT WALTON BEACH, FL 32547

Current Mailing Address:

POST OFFICE BOX 2492
FORT WALTON BEACH, FL 32549

New Mailing Address:

108 HAWKINS RD.
UNIT D
FORT WALTON BEACH, FL 32547

FEI Number: 35-2297728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACREE, TRACY
105 TRUXTON AVENUE
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

OSTEEN, KYLE
108 HAWKINS RD.
UNIT D
FORT WALTON BEACH, FL 32547 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: KYLE OSTEEN

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ACREE, TRACY
Address: POST OFFICE BOX 2492
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: DST () Delete
Name: ACREE, JOHNNETTE
Address: POST OFFICE BOX 2492
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: D () Delete
Name: SIMS, SAMUEL J
Address: 105 TRUXTON AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D&P (X) Change () Addition
Name: OSTEEN, KYLE
Address: 108 HAWKINS RD. UNIT D
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VP (X) Change () Addition
Name: STEELE, STEVE
Address: 108 HAWKINS RD. UNIT B
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S&T (X) Change () Addition
Name: MCLAIN, ASHLEY
Address: 108 HAWKINS RD. UNIT F
City-St-Zip: FORT WALTON BEACH, FL 32547

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: KYLE OSTEEN

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date