

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08895

FILED  
Apr 09, 2010  
Secretary of State

**Entity Name:** ARBOR OAKS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10549 N. FLORIDA AVENUE  
G  
TAMPA, FL 33613 US

**New Principal Place of Business:**

9212 LOST MILL DRIVE  
LAND -O- LAKES, FL 34638 US

**Current Mailing Address:**

10549 N. FLORIDA AVENUE,  
G  
TAMPA, FL 33613 US

**New Mailing Address:**

P.O. BOX 17619  
TAMPA, FL 33682 US

**FEI Number:** 59-2760792

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONDOMINIUM ALLIANCE MGMT. CORP  
10549 N. FLORIDA AVENUE  
G  
TAMPA, FL 33613 US

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

CONDOMINIUM ALLIANCE MGMT. CORP  
9212 LOST MILL DRIVE  
LAND- O- LAKES, FL 34638 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: TUMBA KANYINDA

04/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GANDARA, ADRIAN  
Address: 3410 ARBOR OAKS CT  
City-St-Zip: TAMPA, FL 33614

Title: S  
Name: MCSORLEY, CHARLES  
Address: 3416 ARBOR OAKS CT  
City-St-Zip: TAMPA, FL 33614

Title: T  
Name: WOODS, JAMES  
Address: POB 27072  
City-St-Zip: TAMPA, FL 33623

I hereby 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 all other like empowered.

SIGNATURE: TUMBA J KANYINDA

MGR

04/09/2010

Electronic Signature of Signing Officer or Director

Date