2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Apr 02, 2007 8:00 am
Secretary of State
04-02-2007 90096 019 ****61.25

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DOCUMENT # N21629

1. Entity Name
THE ORR'S POND HOMEOWNERS' ASSOCITATION , INC.

Principal Place of Business	Mailing Address
THE FOSTER CO. 12396 SW 82ND AVENUE MIAMI, FL 33156	THE FOSTER CO. 12396 SW 82ND AVENUE MIAMI, FL 33156

01112007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
9000 SW 152 nd Street	9000 SW 152 nd Street
Suite, Apt. #, etc.: #102	Suite, Apt. #, etc.: #102
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33157 Country: USA	Zip: 33157 Country: USA

4. FEI Number 65-0063950 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCOTT, F. JOSEPH 12396 SW 82ND AVENUE MIAMI, FL 33156	Name: F. JOSEPH SCOTT Street Address (P.O. Box Number is Not Acceptable): 9000 S.W. 152 nd Street # 102 City: MIAMI FL Zip Code: 33157

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ TD MORTON, DAVID 6465 S.W. 72 STREET MIAMI, FL 33143	☐ Delete	PD Sharon Rothberg 6469 SW 72 St Miami FL 33143	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOULD, GERALD 6489 SW 72 STREET MIAMI, FL 33143	☒ Delete	SD DALE HANING 6487 SW 72 ST Miami FL 33143	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HANING, ROSIE 6487 SW 72ND STREET MIAMI, FL 33143	☒ Delete	D YOLANDA COLINDRES 6477 SW 72 ST Miami FL 33143	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SD~~ VPD CHAFFIN, SUZANNE 6467 SW 72ND STREET MIAMI, FL 33143	☐ Delete	D CAROLINA BRUMBAUGH 6479 SW 72 ST Miami FL 33143	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ D FELDMAN, KENNETH 6495 S.W. 72 STREET MIAMI, FL 33143	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROTHBERG, MARTIN 6469 S.W. 72ND STREET MIAMI, FL 33143	☒ Delete		☐ Change ☐ 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: _____ 2.13.07 305-753-1798
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Treas. Date Daytime Phone #