


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # N23048

1. Entity Name
1118 SOUTH ORANGE AVENUE BUILDING
CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address

1118 S ORANGE AVE 3348 EDGEWATER DRIVE
#201 ORLANDO, FL 32804 US
ORLANDO, FL 32806-8203 US

DO NOT WRITE IN THIS SPACE



04222004 No Chg-NP CR2E037 (10/03)

4. FEI Number Applied For
59-2866101 Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

DEMETREE, WILLIAM C
DEMETREE BUILDERS, INC
3348 EGDEWATER DR.
ORLANDO, FL 32804

**DO NOT WRITE
IN THIS SPACE**

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, 2004**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DEMETREE, MARY L 3348 EDGEWATER DRIVE ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD STEINBERG, CHARLES R. 710 EAST COLONIAL DRIVE, SUITE 103 ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUDEZ, M. D. ANTE 1118 SOUTH ORANGE AVENUE, SUITE 201 ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000138583
04/29/04-80086-010 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Mary L Demetrie 4/26/04 (407) 422-8191
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #