## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23048

FILED Mar 24, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

1118 S ORANGE AVE ORLANDO, FL 328068203 US

Current Mailing Address: New Mailing Address:

3348 EDGEWATER DRIVE 1350 N ORANGE AVE

ORLANDO, FL 32804 US SUITE 100
WINTER PARK, FL 32789

FEI Number: 59-2866101 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DEMETREE, MARY
DEMETREE BUILDERS, INC
3348 EGDEWATER DR.
ORLANDO, FL 32804 US

DEMETREE, MARY
DEMETREE, BUILDERS, INC
1350 N ORANGE AVE, STE 100
WINTER PARK, FL 32789 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: 03/24/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: ST () Delete Title: ST (X) Change () Addition Name: DEMETREE, MARY L ST (X) Change () Addition DEMETREE, MARY L

 Address:
 3348 EDGEWATER DRIVE
 Address:
 1350 N ORANGE AVE, STE 100

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:
 WINTER PARK, FL 32789

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CLARK, MICHAEL
 Name:

 Address:
 1118 S ORANGE AVENUE #202
 Address:

 City-St-Zip:
 ORLANDO, FL 32806
 City-St-Zip:

Title: V () Delete Title: () Change () Addition

 Name:
 RUDEZ, ANTE MD
 Name:

 Address:
 1118 S ORANGE AVENUE #201
 Address:

 City-St-Zip:
 ORLANDO, FL 32806
 City-St-Zip:

Title: AS ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 VEGA, WILFREDO MD
 Name:

 Address:
 1118 S ORANGE AVENUE #203
 Address:

 City-St-Zip:
 ORLANDO, FL 32806
 City-St-Zip:

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: MARY L DEMETREE MS 03/24/2009