

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001257

FILED
Mar 13, 2006
Secretary of State

Entity Name: ORANGEWOOD CENTER COMMERCIAL PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

280 DAINES STREET
BIRMINGHAM, MI 48009

New Principal Place of Business:

657 CALEDONIA PLACE
SANFORD, FL 32771

Current Mailing Address:

280 DAINES STREET
BIRMINGHAM, MI 48009

New Mailing Address:

657 CALEDONIA PLACE
SANFORD, FL 32771

FEI Number: 59-3321502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZLOTOFF, ROGER
Address: 280 DAINES STREET
City-St-Zip: BIRMINGHAM, MI 48009

Title: D () Delete
Name: ZLOTOFF, PAUL
Address: 280 DAINES STREET
City-St-Zip: BIRMINGHAM, MI 48009

Title: D () Delete
Name: STOLLMAN, BERNARD
Address: 280 DAINES STREET
City-St-Zip: BIRMINGHAM, MI 48009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GILLIO, MATTHEW
Address: 657 CALEDONIA PLACE
City-St-Zip: SANFORD, FL 32771

Title: D (X) Change () Addition
Name: CHAPMAN, JOHN
Address: 657 CALEDONIA PLACE
City-St-Zip: SANFORD, FL 32771

Title: D (X) Change () Addition
Name: WERNER, FRANK
Address: 657 CALEDONIA PLACE
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN CHAPMAN

D

03/13/2006

Electronic Signature of Signing Officer or Director

Date