## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000006065

Entity Name: RVS-ORLANDO CONDOMINIUM ASSOCIATION, INC.

FILED Apr 27, 2004 Secretary of State

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

2280 N. CORPORATE CIR 5601 WINDHOVER DRIVE HENDERSON, NV 89074 ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

2280 N. CORPORATE CIR
HENDERSON, NV 89074

5601 WINDHOVER DRIVE
ATTN: TAX DEPARTMENT
ORLANDO, FL 32819

FEI Number: 86-0855260 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:

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

GREENSPOON, MARDER, HIRSHFIELD, ET AL
100 W CYPRESS CREEK RD
700
FT LAUDERDALE, FL 33309 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: MICHAEL MARDER 04/27/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 D (X) Change () Addition

 Name:
 FAHERTY, LEO
 Name:
 SIEGEL, DAVID A

 Address:
 2642 SHANNON STREET
 Address:
 5601 WINDHOVER DRIVE

 City-St-Zip:
 ORANGE PARK, FL 32065
 City-St-Zip:
 ORLANDO, FL 32819

Title: VSD ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 MCELROY, VICTOR
 Name:
 DUGAN, THOMAS F

 Address:
 2280 N. CORPORATE CIRCLE DRIVE
 Address:
 5601 WINDHOVER DRIVE

 City-St-Zip:
 HENDERSON, NV 89074
 City-St-Zip:
 ORLANDO, FL 32819

Title: VTD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 STEEMAN, DIANE
 Name:

 Address:
 1645 VILLAGE CENTER CIRCLE 200
 Address:

 City-St-Zip:
 LAS VEGAS, NV 89134
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 MALOOF, ALBERT
 Name:

 Address:
 16322 NW 15TH STREET
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33028
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS F DUGAN T 04/27/2004