

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002659

FILED
Apr 23, 2009
Secretary of State

Entity Name: ORCHID HARBOUR VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

C/O AMERICAN CONDO MGMT
CAPE CORAL, FL 33910

New Mailing Address:

FEI Number: 41-1993848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASE, SUSAN
C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914 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: PD () Delete
Name: NELSON, DUANE
Address: 1613 ORCHID BLVD # 301
City-St-Zip: CAPE CORAL, FL 33904

Title: STD () Delete
Name: RANFRANZ, JAMES
Address: 1613 ORCHID BLVD # 203
City-St-Zip: CAPE CORAL, FL 33904

Title: VD () Delete
Name: HAIR, TOM
Address: 1613 ORCHID BLVD 204
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: DISCENZA, TIMOTHY
Address: 1613 ORCHID BLVD 102
City-St-Zip: CAPE CORAL, FL 33904

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: DUANE NELSON

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date