

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000011813

Entity Name: ORKIN & ASSOCIATES, INC.

FILED
Apr 15, 2007
Secretary of State

Current Principal Place of Business:

12177 CLASSIC DR
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

3300 NORTH UNIVERSITY DR
SUITE 302
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

12177 CLASSIC DR
CORAL SPRINGS, FL 33071 US

New Mailing Address:

3300 NORTH UNIVERSITY DRIVE
SUITE 302
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0391542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORKIN, ARLENE
12177 CLASSIC DR
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

ORKIN, ARLENE
7087 GREAT FALLS CIRCLE
BOYNTON BEACH, FL 33437 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: ARLENE J. ORKIN

04/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ORKIN, ARLENE J.
Address: 12177 CLASSIC DR.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VS () Delete
Name: ORKIN, DAVID
Address: 12177 CLASSIC DR
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: ORKIN, ARLENE J.
Address: 7087 GREAT FALLS CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VS (X) Change () Addition
Name: ORKIN, DAVID
Address: 7087 GREAT FALLS CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARLENE J. ORKIN

PRES

04/15/2007

Electronic Signature of Signing Officer or Director

Date