

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Aug 10, 2007
Secretary of State**

DOCUMENT# 734095

Entity Name: THE TOWNHOMES OF ORIOLE ASSOCIATION, INC.**Current Principal Place of Business:**1401 NW 80TH AVE
MARGATE, FL 33063 US**New Principal Place of Business:****Current Mailing Address:**1401 NW 80TH AVE
MARGATE, FL 33063 US**New Mailing Address:**

FEI Number: 59-1724549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:BROUGH, CHADROW, & LEVINE P.A
1900 N. COMMERCE PKWY
WESTON, FL 33326 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: P () Delete
Name: BOWYER, JIM
Address: 8090 NW 3RD STREET 13-H
City-St-Zip: MARGATE, FL 33063Title: S () Delete
Name: BANKS, IRENE
Address: 1419 NW 80TH AVE. 19-F
City-St-Zip: MARGATE, FL 33063Title: T () Delete
Name: SORRELL, DAMION
Address: 8090 NW 13TH STREET 13-E
City-St-Zip: MARGATE, FL 33063Title: D () Delete
Name: BRADY, NANCY
Address: 1605 NW 80TH AVE. 24-F
City-St-Zip: MARGATE, FL 33063Title: D () Delete
Name: ACUNA, PRICILLA
Address: 1527 NW 80TH AVE 30-I
City-St-Zip: MARGATE, FL 33063**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: WESTON, NARENE
Address: 1051 N.W. 80TH TERRACE 4-I
City-St-Zip: MARGATE, FL 33063Title: T (X) Change () Addition
Name: BANKS, IRENE
Address: 1419 NW 80TH AVE. 19-F
City-St-Zip: MARGATE, FL 33063Title: S (X) Change () Addition
Name: BRADY, NANCY
Address: 1605 NW 80TH AVE. 24-F
City-St-Zip: MARGATE, FL 33063Title: D (X) Change () Addition
Name: STOUT, KELLY
Address: 1523 NW 80TH AVE 23-B
City-St-Zip: MARGATE, FL 33063Title: D (X) Change () Addition
Name: WILSON, CHARLES E JR.
Address: 1151 N.W. 80TH AVE. 10-C
City-St-Zip: MARGATE, FL 33063

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: CHARLES E. WILSON, JR.

D

08/10/2007

Electronic Signature of Signing Officer or Director_____
Date