# I hereby 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 all other like empowered.

PRESIDENT

#### SIGNATURE: MARGARET WARNER

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA NOT FOR PROF	T CORPORATION ANNUAL REPORT
DOCUMENT# 724988	

Entity Name: ORIOLE GOLF & TENNIS CLUB CONDOMINIUM ONE C ASSOCIATION, INC.

#### Current Principal Place of Business:

C ASSOCIATION, INC. 7857 GOLF CIRCLE DR. MARGATE, FL 33063

# **Current Mailing Address:**

7777 GOLF CIRCLE DRIVE MARGATE, FL 33063

# FEI Number: 59-1529232

#### Name and Address of Current Registered Agent:

SCOTT BENDER, ESQ., ATTORNEY AT LAW 7446 ROYAL PALM BLVD. MARGATE, FL 33063 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:

Electronic Signature of Registered Agent

## Officer/Director Detail :

Title	Т	Title	Ρ
Name	KULLER, SHIRLEY	Name	WARNER, MARGARET
Address	7857 GOLF CIR.DR. C 112	Address	7857 GOLF CIRCLE DR. #312
City-State-Zip:	MARGATE FL 33063	City-State-Zip:	MARGATE FL 33063
Title	S	Title	DIR
Title Name	S BERNSTEIN, ADRIENNE	Title Name	DIR NAPOLI, JOHN
	-		

Certificate of Status Desired: No

FILED Jan 30, 2014 Secretary of State CC0300345128

> 01/30/2014 Date

Date