

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23048

**Entity Name:** 1118 SOUTH ORANGE AVENUE BUILDING CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 23, 2015**  
**Secretary of State**  
**CC9119158195**

**Current Principal Place of Business:**

C/O ASSET REAL ESTATE INC  
4004 EDGEWATER DRIVE  
ORLANDO, FL 32804

**Current Mailing Address:**

C/O ASSET REAL ESTATE INC  
4004 EDGEWATER DRIVE  
ORLANDO, FL 32804 US

**FEI Number: 59-2866101**

**Certificate of Status Desired: No**

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

ASSET REAL ESTATE INC  
4004 EDGEWATER DRIVE  
ORLANDO, FL 32804 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title SD  
Name STEINBERG, CHARLES  
Address C/O ASSET REAL ESTATE INC  
4004 EDGEWATER DRIVE  
City-State-Zip: ORLANDO FL 32804

Title PD  
Name CLARK, MICHAEL  
Address C/O ASSET REAL ESTATE INC  
4004 EDGEWATER DRIVE  
City-State-Zip: ORLANDO FL 32804

Title VPD  
Name RUDEZ, ANTE MD  
Address C/O ASSET REAL ESTATE INC  
4004 EDGEWATER DRIVE  
City-State-Zip: ORLANDO FL 32804

Title D  
Name DEMETREE, MARY  
Address C/O ASSET REAL ESTATE INC  
4004 EDGEWATER DRIVE  
City-State-Zip: ORLANDO FL 32804

*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.*

**SIGNATURE: MICHAEL CLARK**

**PRESIDENT**

**04/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date