


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90131 010 ****61.25

DOCUMENT # 708281

1. Entity Name
ORANGE LAKE CIVIC CENTER, INC.



Principal Place of Business Mailing Address

**11803 104TH STREET NORTH
LARGO FL 33773
US** **11803 104TH STREET NORTH
LARGO FL 33773
US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

* City & State City & State

Zip Country Zip Country

4. FEI Number **59-1086909** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**GOLDBERG, SHIRLEY A
10384 - 111TH PL., N.
LARGO FL 33773**

7. Name and Address of New Registered Agent

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
City _____ **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Shirley A. Goldberg* Treasurer *1/6/03*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	ANTOSKI, LOIS
STREET ADDRESS	10413- 118TH AVE., N.
CITY-ST-ZIP	LARGO FL 33773
TITLE	P <input type="checkbox"/> Delete
NAME	HENRIKSON, JOAN
STREET ADDRESS	10427 - 125TH AVE
CITY-ST-ZIP	LARGO FL 33773
TITLE	T <input type="checkbox"/> Delete
NAME	GOLDBERG, SHIRLEY A
STREET ADDRESS	10384 - 111TH PL., N.
CITY-ST-ZIP	LARGO FL 33773
TITLE	D <input type="checkbox"/> Delete
NAME	HUHN, JANE
STREET ADDRESS	10939 - 111TH PL., N.
CITY-ST-ZIP	LARGO FL 33778
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	GOODENOUGH, BRUCE
STREET ADDRESS	10372 - 111TH PL., N.
CITY-ST-ZIP	LARGO FL 33773
TITLE	D <input type="checkbox"/> Delete
NAME	SANTARO, ONDA
STREET ADDRESS	11151 108TH LN N
CITY-ST-ZIP	LARGO FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John Gabriel
STREET ADDRESS	10523 - 117th Dr., N.
CITY-ST-ZIP	Largo, FL 33773
TITLE	_____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	_____
STREET ADDRESS	_____
CITY-ST-ZIP	_____
TITLE	_____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	_____
STREET ADDRESS	_____
CITY-ST-ZIP	_____
TITLE	_____ <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	_____
STREET ADDRESS	_____
CITY-ST-ZIP	_____

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Shirley A. Goldberg* 1/6/2003 (727) 391-3671

CR2E037 (10/02)