2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 14, 2006 8:00 am
Secretary of State
06-14-2006 90006 042 ****61.25

DOCUMENT # 725587

1. Entity Name
ORANGE TREE VILLAGE CONDOMINIUM, INC

Principal Place of Business	Mailing Address
709 E MICHIGAN ST ORLANDO, FL 32806 US	P.O. BOX 560698 ORLANDO, FL 32856-0648 US

03232006 Chg-NP CR2E037 (11/05)

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 59-1539804 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MITCHELL, TRACY L
709 E MICHIGAN ST
ORLANDO, FL 32806

7. Name and Address of New Registered Agent

Name Beth Palmer
Street Address (P.O. Box Number is Not Acceptable) 221 Walton Heath Drive
City Orlando FL Zip Code 32828.

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 _____ 5-10-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD POWELL, KELLY 2786-D CURRY FORD RD ORLANDO, FL 32806	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROBERTS, EIRWEN 2794-A CURRY FORD RD ORLANDO, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition Eirwen S Roberts
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SCHYBERG, MARYLOU 2700 ORANGE PEEL COURT ORLANDO, FL 32806	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition Sharon B. Brady
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition VPD Sharon Brady 2792-D Curry Ford Rd Orlando, FL 32806
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Eirwen Roberts 6-1-06 407-282-6795
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #