## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 725587** 

FILED Mar 31, 2009 Secretary of State

Entity Name: ORANGE TREE VILLAGE CONDOMINIUM, INC

Current Principal Place of Business: New Principal Place of Business:

221 WALTON HEATH DR. ORLANDO, FL 32828 US

Current Mailing Address: New Mailing Address:

P.O. BOX 560698 ORLANDO, FL 328560648 US

FEI Number: 59-1539804 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PALMER, BETH 221 WALTON HEATH DR ORLANDO, FL 32828 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

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 STD () Delete
 Title:
 STD (X) Change () Addition

 Name:
 POWELL, KELLY
 Name:
 MANKAMYER, JOANNE

 Address:
 2786-D CURRY FORD RD
 Address:
 2798-D CURRY FORD RD

 City-St-Zip:
 ORLANDO, FL 32806
 City-St-Zip:
 ORLANDO, FL 32806

Title: PD ( ) Delete Title: VPD (X) Change ( ) Addition Name: ROBERTS, EIRWEN, Name: ROBERTS, EIRWEN,

Address: 2794-A CURRY FORD RD
City-St-Zip: ORLANDO, FL
City-St-Zip: ORLANDO, FL
City-St-Zip: ORLANDO, FL

Title: VPD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 BRADY, SHARON
 Name:
 BRADY, SHARON

 Address:
 2792-D CURRY FORD RD
 Address:
 2792-D CURRY FORD RD

 City-St-Zip:
 ORLANDO, FL 32806
 City-St-Zip:
 ORLANDO, FL 32806

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: SHARON BRADY PD 03/31/2009