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

## **DOCUMENT # 762655**

1. Entity Name

Principal Place of Business

ORANGE LAKE COUNTRY C CIATION, INC.



Apr 28, 2003 8:00 am § Secretary of State 04-28-2003 91324 030 \*\*\*\*70.00

**FILED** 

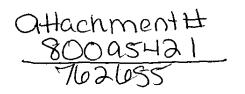
CLUB VIL	LAS CONDOMINIUM ASSO	
HWY.	Mailing Address 8505 WEST IRLO BRONSON MEM	ODIAL LIMAY
MAA I.	DOUD WEST INTO DRONSON MEM	JRIAL HYFT.

8505 WEST IRLO BRONSON MEMORIAL HWY. KISSIMMEE FL 34747			8505 WEST IRLO BRONSON MEMORIAL HWY. KISSIMMEE FL 34747									
			<b>-</b>									<b>             </b>
2. Principal F	Place of Busir	ness	3. Maili	ng Address				1 100111 10010 6111	<u> </u>			il 01611 1881
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & Stat	le		City	City & State				4. FEI Number <b>62-1134849</b> Applied For				
Zip		Country	Zip	T	Country			Not Applicable  5. Certificate of Status Desired \$8.75 Additional				
	6. Name	and Address of Current	Registered	d Agent	<u> </u>			7. Name and Address of New Registered Agent				
						Name					<u> </u>	
LOWER,	LOWER, BRIAN T				Street Address (P.O. Box Number is Not Acceptable)							
		RONSON MEMORIAL HI	IGHWAY			000171						
KISSIMM	EE FL 3474	17-8201									<u></u>	
				-		City	- <u>-</u> -			FL	Zip Code	e
8. The above	named entit	y submits this statement fo	or the purpo	se of changing its r	egistere	ed office or	registere	ed agent, or both, in the	ne State of Florid	da. I am fa	amiliar with,	and accept
the obligat	tions of regist	tered agent.										
CICNATURE												
SIGNATURE		or printed name of registered agent	and title if appli	cable. (NOTE:	Registere	1 Agent signati	re required	when reinstating)		DATE		
				9. Election Cam	ooian C	inggaing		AC 00	- Bioles	Chack	Payable	••
	FILE NOW	/: FEE IS \$61.25		Trust Fund Co				\$5.00 May Be Added to Fees			ment of S	
10.		OFFICERS AND DIF	RECTORS	<del></del>	11.		A	L DDITIONS/CHANGE	S TO OFFICERS	AND DIR	ECTORS IN	10
TITLE	D			☐ Delete	TITLE						☐ Change	Addition
NAME		BRUNO, JOESPH			NAM		(See Attached)					
STREET ADDRESS CITY-ST-ZIP	8505 W IF   KISSIMME	rlo bronson memof :c ei	KIAL HWY			et address ·ST-ZIP	(50	e Attacheu)				ļ
TITLE	D	<u>: :                                  </u>		Delete	TITLE						Change	Addition
NAME	_	DOLPH, DALE		C Detere	NAM						Change	
STREET ADDRESS			ΝΥ	STRE	ET ADDRESS							
CITY-ST-ZIP	TOOMINEE I COTTO		CITY-	·ST-ZIP								
TITLE	SD	140) FO V III		Delete	TITLE	ſ					Change	Addition \
NAME STREET ADDRESS		SWAN, CHARLES K. III 8505 W. IRLO BRONSON MEMORIAL HWY		NAM	ET ADDRESS						}	
CITY-ST-ZIP	KISSIMME		NIAL HAAT			ST-ZIP						1
TITLE	PD	.L 1 <u>L</u>	<del></del>	☐ Delete	TITLE	-	-	<del></del>			☐ Change	Addition
NAME	ROYE, BE	TH ANN			NAM				÷			
STREET ADDRESS		rlo bronson memoi	rial Hwy	•		ET ADDRESS						
CITY-ST-ZIP		E FL 34747			-	·ST-ZIP						
TITLE NAME	TD	I, STEPHEN E		☐ Delete	. TITLE NAME						☐ Change	Addition
STREET ADDRESS		N, STEPHEN E RLO BRONSON MEMOI	RIAL HWY	,		ET ADDRESS						1
CITY-ST-ZIP	-	E FL 34747	W. 11071			ST-ZIP						
TITLE	VPD	<del></del>		☐ Delete	TITLE						☐ Change	Addition
NAME	WOLBERT	. DV/ID			NAME	.						
STREET ADDRESS	ADDRESS 8505 W. IRLO BRONSON MEMORIAL HWY				7 47 1 910	. ,						,
CITY-ST-ZIP		RLO BRONSON MEMOI	RIAL HWY	•	STRE	ET ADDRESS ST-ZIP						ĺ

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:** 

REcharles K Dswan III, Secretary 4/23/03 407.239.0000



## ORANGE LAKE COUNTRY CLUB VILLAS CONDOMINIUM ASSOCIATION, INC. (FEI # 62-1134849)

## 8505 West Irlo Bronson Memorial Highway Kissimmee, FL 34747

Beth Ann Roye	D/P
David Wolbert	D/VP
Charles K. Swan III	D/S
Stephen E. Johnson	D/T
Joseph Bruno	D
Dale Dolph	D
Lawrence Goode	D

D=Director, C=Chairman, P=President, CEO=Chief Executive Officer, CFO=Chief Financial Officer, Sr. VP=Senior Vice President, VP=Vice President, S=Secretary, T=Treasurer, Asst.=Assistant