


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 16, 2004 8:00 am**  
**Secretary of State**

02-16-2004 90041 029 \*\*\*\*61.25

<b>DOCUMENT # N00000000428</b>					
1. Entity Name ORANGE LAKE VILLAGE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 11803 104TH STREET NORTH LARGO, FL 33773			Mailing Address PO BOX 719 LARGO, FL 33779		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
RUNEY, HENRY 10345-111TH PL N LARGO, FL 33773				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P	<input type="checkbox"/> Delete	TITLE	P/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUNEY, HENRY		NAME	RUNEY, HENRY	
STREET ADDRESS	10345-111 PL N.		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DANI, DONAHUE		NAME	OSBORNE, RICHARD	
STREET ADDRESS	1923 104 LN N.		STREET ADDRESS	11649 106 ST	
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP	LARGO, FL 33773	
TITLE	S	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROSE, ROSADO		NAME	SCARBERRY, BERNIE	
STREET ADDRESS	11826 104TH LANE NORTH		STREET ADDRESS	10463 1100TH AVE	
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP	LARGO, FL 33773	
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUNN, MIKE		NAME	LACROIX, PAT	
STREET ADDRESS	10403 118 AVE. N.		STREET ADDRESS	11098 106 ST	
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP	LARGO, FL 33773	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURAWSKI, SUSAN		NAME		
STREET ADDRESS	11821-104 LANE N		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEARCE, BETTY		NAME		
STREET ADDRESS	10565-118 AVE N		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33773		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: <u>Henry W. Runey</u>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>2/10/04</u> 727-391-4830	

49010322



02102004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3634826 Applied For Not Applicable

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

FL Zip Code

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

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SIGNATURE: Henry W. Runey SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 2/10/04 727-391-4830 Daytime Phone #