


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 28, 2007 8:00 am**  
**Secretary of State**

03-28-2007 90010 016 \*\*\*\*61.25

**DOCUMENT # N00000000428**

1. Entity Name  
 ORANGE LAKE VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business  
 11826 104TH LANE NORTH  
 LARGO, FL 33773

Mailing Address  
 PO BOX 719  
 LARGO, FL 33779

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

40043362



03062007 Chg-NP CR2E037 (12/06)

4. FEI Number  
 59-3634826

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
 ROSADES, ROSE  
 11826 104TH LANE NORTH  
 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

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	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STRAUSS, JEAN		NAME	ROSE A. ROSADO	
STREET ADDRESS	11296 102ND LANE NORTH		STREET ADDRESS	11826 104TH LANE NORTH	
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP	LARGO, FL 33773	
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALGUIRE, DAVID		NAME	KEVIN HARNSON	
STREET ADDRESS	11807 102ND NORTH		STREET ADDRESS	12024 103RD ST NO	
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP	LARGO, FL 33773	
TITLE	I	<input checked="" type="checkbox"/> Delete	TITLE	F	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BUSHEY, MICHAEL		NAME	HENRY RUNEY	
STREET ADDRESS	10467 112TH AVE NORTH		STREET ADDRESS	10345 111TH PL NO	
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP	LARGO, FL 33773	
TITLE	D	<input type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAGERTY, GRACE		NAME		
STREET ADDRESS	11747 104TH NORTH		STREET ADDRESS		
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JAMES, LAURIE		NAME	PATRICIA BANNON	
STREET ADDRESS	11169 102ND NORTH		STREET ADDRESS	10210 117TH PL NO	
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	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 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: Rose A Rosado ROSE A ROSADO

3/23/07 121-394-8459  
 Date Daytime Phone #