


03-04-2003 90071 040 \*\*\*\*70.00

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

80045360

<b>DOCUMENT # N0000000428</b>			
1. Entity Name <b>ORANGE LAKE VILLAGE HOMEOWNERS ASSOCIATION, INC.</b>			
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
		4. FEI Number <b>59-3634826</b>	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>RUNEY, HENRY 10346-111TH PL N LARGO, FL 33773</b>		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when retreating)</small>			
FILE NOW - FEE IS \$6125		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			
TITLE	P	<input type="checkbox"/> Delete	
NAME	RUNEY, HENRY		
STREET ADDRESS	10346-111 PL N		
CITY-ST-ZIP	LARGO, FL 33773		
TITLE	V	<input checked="" type="checkbox"/> Delete	
NAME	GOLTL, RICK		
STREET ADDRESS	11786 102ND STREET NORTH		
CITY-ST-ZIP	LARGO, FL 33773		
TITLE	S	<input type="checkbox"/> Delete	
NAME	ROSE, ROSADO		
STREET ADDRESS	11826 104TH LANE NORTH		
CITY-ST-ZIP	LARGO, FL 33773		
TITLE	T	<input checked="" type="checkbox"/> Delete	
NAME	MIRANDA, VALERIE		
STREET ADDRESS	10564 118TH TERRACE NORTH		
CITY-ST-ZIP	LARGO, FL 33773		
TITLE	D	<input type="checkbox"/> Delete	
NAME	MURAWSKI, SUSAN		
STREET ADDRESS	11821-104 LANE N		
CITY-ST-ZIP	LARGO, FL 33773		
TITLE	D	<input type="checkbox"/> Delete	
NAME	PEARCE, BETTY		
STREET ADDRESS	10565-118 AVE N		
CITY-ST-ZIP	LARGO, FL 33773		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	DANI DONAHUE		
STREET ADDRESS	11923 104 LN N		
CITY-ST-ZIP	LARGO, FL 33773		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MIKE DUNN		
STREET ADDRESS	10403 118 AVE N		
CITY-ST-ZIP	LARGO, FL 33773		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BERNARD SCARBERRY		
STREET ADDRESS	10463 110 AVE N		
CITY-ST-ZIP	LARGO, FL 33773		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			
STREET ADDRESS			
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 titles empowered.			
SIGNATURE: <i>Henry Runey</i>		2/27/03 727-391-4830	
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR20037 (1/01/02)