2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2007 8:00 am
Secretary of State
07-09-2007 90043 023 ****61.25

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1. Entity Name
ORANGE MANOR EAST MOBILE HOME OWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
93 ORANGE MANOR DRIVE WINTER HAVEN, FL 33884	93 ORANGE MANOR DRIVE WINTER HAVEN, FL 33884

04092007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
76 MURCOTT DRIVE	76 MURCOTT DRIVE
Suite, Apt. #, etc. WINTER HAVEN, FL	Suite, Apt. #, etc. WINTER HAVEN, FL
City & State (POLK COUNTY)	City & State (POLK COUNTY)
Zip 33884 Country USA	Zip 33884 Country USA

4. FEI Number 59-2543681 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
The Sherman Law Firm, PLLC Joel Lee Sherman, Esquire 115 North MacDill Avenue Tampa, FL 33609-1521	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 _____ 7/5/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	T (APPOINTEE) SNIDER, THOMAS 105 MURCOTT DRIVE WINTER HAVEN, FL 33884	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WINDHAUSEN, CHARLES EDWARD 134 MANDARIN DRIVE WINTER HAVEN, FL 33884	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BUTLER, JAY 93 ORANGE MANOR DR WINTER HAVEN, FL 33884	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP EGGLESTON, EUGENE (ROY) 76 MURCOTT DRIVE WINTER HAVEN, FL 33884	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WINDHAUSEN, EDWARD 134 MANDARIN DR. WINTER HAVEN, FL 33884	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALTENBURG, PAUL 66 TEMPLE CIRCLE WINTER HAVEN, FL 33884	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MCCAROL, HOWARD 181 VALENCIA DR. WINTER HAVEN, FL 33884	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LONG, REBECCA (BECKY) 21 TEMPLE CIRCLE WINTER HAVEN, FL 33884	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOLDEN, VINCE 201 ORANGE MANOR DRIVE WINTER HAVEN, FL 33884	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BELL, GLENN 122 MANDARIN DRIVE WINTER HAVEN, FL 33884	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WOODS, CONNIE 182 VALENCIA WINTER HAVEN, FL 33884	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Charles Eglundhausen (CHARLES E WINDHAUSEN) 04/09/07 8633241802
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #