2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2004 8:00 am Secretary of State

DOCUMENT # N22198 1. Entity Name ORLANDO NORTH INDUSTRIAL PARK OWNER'S ASSOCIATION, INC.						05-03-2004 91251 019 ****61.25				
Principal Place %LINDA NEU P.O. BOX 915 LONGWOOD,	Mailing Address %LINDA NEUMA P.O. BOX 91594 LONGWOOD, FL	LINDA NEUMAN								
2. Principal Place of Business 3. M		3. Mailing Address	ailing Address]				
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.			04222004 _C	hg-NP	CR2E037 (10/03	3)	
City & State		City & State	City & State			4. FEI Number 59-288037	73		Applied For Not Applicable	
Zip	Country	Zip	Co	untry		-5 Certificate of S	tatus Desired	\$8.75 Fee Requ		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent										
NEWMAN, LINDA				Name	Name					
650 LÓNG		Street Address (P.O. Box Number is Not Acceptable)					
LONGWOOD, FL 32779										
<i>:</i>				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.										
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SIGNATURE										
- Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
, , ,		9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees		ke check payabl la Department o	State		
10.	ECTORS	11.			ADDITIONS/CHANG	ES TO OFFICER	S AND DIRECTORS	110 1211 11 11 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOLEK, EDWIN C 321 NEEDLES COURT LONGWOOD, FL 32779	☐ Dele	NAI Str		PO WOU 2030	EK, EDWI 6 SPUNT B PK4, FL 32	N C. WO STE 1	Chan	ge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SNYDER, JOHN 2152 SPRINT BLVD APOPKA, FL 32703	☐ Dele	NA/ Str		140	<u> </u>	<u>-</u>	☐ Chan	ge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERRIMAN, CONNIE 2152 SPRINT BLVD. APOPKA, FL	Dele	NA/ STF					Chan	ge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEITLER, BOB 2098 SPRINT BLVD APOPKA, FL 32703	Dele	NAI Ste					☐ Chan	ge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRISON, MARVIN 2152 SPRINT BLVD APOPKA, FL 32703	Dele	NA STF	1				☐ Chan	ge 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Dele	NA STF	LE ME REET ADDRESS Y-ST-ZIP	105	PRESIDENT PER, RNSS 64 SPRINT 1 1/14, PL 32	, BLVO	☐ Chan	ge Addition	

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 attachmant with an address, with all other like empowered.

SIGNATURE

MATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14/30/2004 67-884-0844