

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90408 035 ****61.25

DOCUMENT # N22198 1. Entity Name ORLANDO NORTH INDUSTRIAL PARK OWNER'S ASSOCIATION, INC.	
--	---

Principal Place of Business %LINDA NEUMAN P.O. BOX 915949 LONGWOOD, FL 32779	Mailing Address %LINDA NEUMAN P.O. BOX 915949 LONGWOOD, FL 32779
--	--

DO NOT WRITE IN THIS SPACE

14013916



04142005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2880373	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent NEWMAN, LINDA 650 LONGMEADOW CIR LONGWOOD, FL 32779	DO NOT WRITE IN THIS SPACE
---	---------------------------------------

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.

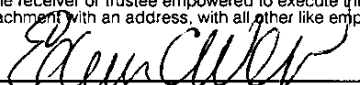
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOLEK, EDWIN C 2036 SPRINT BLVD., STE 11 APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SNYDER, JOHN 2152 SPRINT BLVD APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERRIMAN, CONNIE 2152 SPRINT BLVD. APOPKA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARPER, RUSS 2054 SPRINT BLVD. APOPKA, FL 32703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:  **EDWIN C WOLEK** 4/29/05 407-884-0844

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #