2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Secretary of State DOCUMENT # N29888 03-12-2008 90035 006 ****61.25 Entity Name ORANGEWOOD LAKES MOBILE HOMEOWNERS ASSOCIATION, INC. 400** Principal Place of Business Mailing Address P. O. BOX 1675 P. O. BOX 1675 NEW PORT RICHEY, FL 34653 NEW PORT RICHEY, FL 34653 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02282008 Chg-NP CR2E037 (12/06) City & State City & State Applied For FEI Number NOT APPLICABLE Not Applicable Zło Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MCDERMOTT, JAMES Street Address (P.O. Box Number is Not Acceptable) 6526 SUN COUNTRY DR. NEW PORT RICHEY, FL 34653 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. JAMES MCDERMOT Teb-, 28, Signature, typed or printed name of registered agent and title if it Make check payable to Florida Department of State \$5.00 May Be 9. Election Campaign Financing Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2008 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Delete PRESIDENT Change . TITLE TITLE LAPRIORE, ROBERT 7751 WAYBURY ST. NEW PORT RICHEY, FL. 34653 LYDICK, STELLA NAME NAME 6426 RAMBLING RD STREET ADDRESS STREET ADDRESS NEW PORT RICHEY, FL 34653 CITY-ST-ZIP CITY-ST-ZIP VICE PRESIDENT Change WHALEY, RICHARD 7814 WAYBURY NEW FORT RICHEY, FL. 34653 DIRECTOR LAPORTE, SHIRLEY 7911 SUNRUNNER NEW FORT RICHEY, FL. 34653 Addition Delete TITLE TITLE LA PRIERE, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 7751 WAYBURY ST CITY-ST-ZIP CITY_ST-7IP NEW PORT RICHEY, FL. 34653 Addition ☐ Delete TITLE TITLE NAME NAME MCDERMOTT, JAMES STREET ADDRESS 6526 SUN COUNTRY DR. STREET ADDRESS CITY-ST- ZP NEW PORT RICHEY, FL 34653 CITY-ST-ZIP DIRECTOR PRITCHARD, JIM 7910 ORANGEWOOD LAKES Addition Delete TITLE TTLE NAME SOMERS JANE NAME 7855 SUN RUNNER STREET ADDRESS STREET AODRESS NEW PORT RICHEY, FL. 34653 CITY-ST-ZIP NEW PORT RICHEY, FL 34653 CITY-ST-ZP DIRECTOR CHANGE I NADERY, MIKE BELLE TERRE ST. NEW PORT RICHEY, FL. 34653 Delete TITL F GILLIS, GERALD NAME NAME STREET ADDRESS 7745 WAYRURY STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 34653 CITY-ST-ZIP Delete TITLE TITLE HOLMAN, PATRICIA NAME NAME 7751 COLD SPRING LN STREET ADDRESS STREET ADDRESS CITY-ST-ZP NEW PORT RICHEY, FL 34653 CITY-ST-7P 12. I hereby certify that the information supplied with this filling 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

JAMES

FILED Mar 12, 2008 8:00 am