2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 11, 2002 8:00 am Secretary of State **DOCUMENT # N29994** 1. Entity Name 03-18-2002 90182 035 ****61.25 ORANGEWOOD ACRES HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 2552 N. ORANGEWOOD ST. 2552 N. ORANGEWOOD ST. AVON PARK FL 33825 AVON PARK FL 33825 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0387950 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) RHODES, CLIFFORD R P.A. 227 N RIDGEWOOD DRIVE SEBRING FL 33870 Zip Code City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. 9/01 TITLE ☐ Delete TITLE CHAFE, BLANCHE NAME NAME 2506 W. OKANGEWOOD ST. STREET ADDRESS 2484 N ORANGEWOOD ST STREET ADDRESS 33825 CITY-ST-ZIP **AVON PARK FL 33825** CITY-ST-7IP Addition ☐ Delete TITLE ROLLINS, ALVIN WATTS, RON NAME NAME 2476 NORANGEWOOD 1743 W ORANGEWOOD PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AVON PARK FL 33825 TITLE ☐ Delete TITLE SAUNDERS, FENTON NAME NAME 2521 N ORANGEWOOD ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP --AVON PARK FL 33825 CITY-ST-7IP . Change ☐ Addition ☐ Detete TITLE JOHNSON, ARVONA NAME NAME 2494 N ORANGEWOOD ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **AVON PARK FL 33825** ☐ Chance Addition ATD ☐ Delete TITLE TITLE FARMER, CATHERINE NAME 2488 N ORANGEWOOD ST STREET ADDRESS STREET ADDRESS **AVON PARK FL 33825** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE TATE, WALTER NAME 1751 W ORANGEWOOD PL STREET ADDRESS STREET ADDRESS **AVON PARK FL 33825** CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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

FILED