2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2009
Secretary of State

DOCUMENT# N29994

Entity Name: ORANGEWOOD ACRES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2552 N. ORANGEWOOD ST.
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

2552 N. ORANGEWOOD ST.
AVON PARK, FL 33825

New Mailing Address:

FEI Number: 65-0387950 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BREED III, MARK E P.A.
325 NORTH COMMERCE AVE
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BUSBY, ROBERT
Address: 2464 N ORANGEWOOD ST
City-St-Zip: AVON PARK, FL 33825

Title: V ( ) Delete
Name: WAWRZYNSKI, CAROL
Address: 2494 ORANGEWOOD ST
City-St-Zip: AVON PARK, FL 33825

Title: T ( ) Delete
Name: MANGANO, DANA
Address: 2546 N ORANGEWOOD ST
City-St-Zip: AVON PARK, FL 33825

Title: S ( ) Delete
Name: MACK, JOAN
Address: 2490 ORANGEWOOD ST
City-St-Zip: AVON PARK, FL 33825

Title: D ( ) Delete
Name: GUSTAVSON, IVAN
Address: 1613 ORANGEWOOD CT
City-St-Zip: AVON PARK, FL 33825

Title: D ( ) Delete
Name: TATE, WALTER
Address: 1751 ORANGEWOOD PL
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT BUSBY PD 07/07/2009

Electronic Signature of Signing Officer or Director — Date