

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 12, 2006 8:00 am**  
**Secretary of State**

04-12-2006 90094 006 \*\*\*\*70.00

**DOCUMENT # N93000005054**



1. Entity Name  
**ORANGE LAKE COUNTRY CLUB VILLAS CONDOMINIUM ASSOCIATION II, INC.**

Principal Place of Business  
**8505 WEST IRLO BRONSON MEMORIAL HWY.  
 KISSIMMEE, FL 34747-8201**

Mailing Address  
**8505 WEST IRLO BRONSON MEMORIAL HWY.  
 KISSIMMEE, FL 34747-8201**

00000011



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01192006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number  
**59-3209554**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LOWER, BRIAN T  
 8505 WEST IRLO BRONSON MEMORIAL HIGHWAY  
 KISSIMMEE, FL 34747-8201**

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  Delete  
 NAME SCHWARTZ, DONNA  
 STREET ADDRESS 8505 WEST IRLO BRONSON MEM HWY  
 CITY-ST-ZIP KISSIMMEE, FL 34747

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE VPD  Delete  
 NAME HARRILL, DON L  
 STREET ADDRESS 8505 W. IRLO BRONSON HWY  
 CITY-ST-ZIP KISSIMMEE, FL 34747

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE SD  Delete  
 NAME AGREST, ROSALIE  
 STREET ADDRESS 8505 W. IRLO BRONSON MEMORIAL HWY.  
 CITY-ST-ZIP KISSIMMEE, FL 34747

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE TD  Delete  
 NAME TURNER, DONALD  
 STREET ADDRESS 8505 W. IRLO BRONSON MEMORIAL HWY.  
 CITY-ST-ZIP KISSIMMEE, FL 34747

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE D  Delete  
 NAME SCHISLER, CHARLES  
 STREET ADDRESS 1629 WINCHESTER ROAD  
 CITY-ST-ZIP MEMPHIS, TN 38116

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other individuals empowered.

**SIGNATURE:** \_\_\_\_\_

*Don L. Harrill*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Don L. Harrill

3/30/06

Date

407.239.5200

Daytime Phone #

ATTACHMENT

20028671

#N93008005054

ORANGE LAKE COUNTRY CLUB VILLAS CONDOMINIUM ASSOCIATION  
II, INC.  
(FEI # 59-3209554)

8505 West Irlo Bronson Memorial Highway  
Kissimmee, FL 34747

Donna Schwartz	D/P
Don L. Harrill	D/VP
Rosalie Agrest	D/S
Donald Turner	D/T
Charles Schisler	D

D=Director, C=Chairman, P=President, CEO=Chief Executive Officer, CFO=Chief Financial Officer, Sr. VP=Senior Vice President, VP=Vice President, S=Secretary, T=Treasurer, Asst.=Assistant