FILED

Apr 26, 2000 8:00 am Secretary of State

DOCUMENT # N99000006635

1. Entity Name

ORANGE LAKE COMMUNITY CLUB, INC.

					03-04-2000 9006	52 040 ***	*70.00	
Principal Place of Business Mailing Address					05 01 2000 7000	22010	70.00	
18349 NW 60 AVE ORANGE LAKE FL 32681		P O 80X 232 ORANGE LAKE FL 32681-0232						
2. Principal Pla	ace of Business	3. Mailing Address						
					14 (5)16 (4)() \$4() 44() 45)(58(() 46))	10 Bitte 51169 FILE) 4 271 (84 1	
Suite, Apt, #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Number	4. FEI Number Applied For			
					9-3626572	Not	Applicable	
Zip	Country	Zip Country		5. Certificate of	5. Certificate of Status Desired \$8.75 Additional			
6. Name and Address of Current Re		enlatered Arent		7. Name and	7. Name and Address of New Registered Agent			
,, ,,,,,			Name			1,30,11		
			Street Address (P.O. Box Number is Not Acceptable)					
JAMERSON, MITCHELL 18349 NW 60 AVE			Circle Addison (1.0. Box Addison of the Addisonal Control					
ORANGE LAKE FL 32681							i	
OIMINGE EASTE SE GEODS			City		FL	Zip Code		
8. The above	named entity submits this statement for t	the purpose of changing its re	distered office or	registered agent, or both		<u>- L</u>		
SIGNATURE	Mtt. James Signature, typed or printed name of registered agent an	(Mitchall J		ure required when reinstalling)	02/2 DATE	8/00		
FILE NOW: FEE IS \$61.25				\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIRE	CTORS	11.		ANGES TO OFFICERS AND D	RECTORS IN	10	
TITLE ASST	Officer	☐ Delete	TITLE T	Lawanda 1	DWERY T	Change	☐ Addition	
NAME SCC	Elaine Allen		NAME STREET ADDRESS	1 ' m / . m / . h / / / / / / / / / / / / / / / / /	111/2 / 5/21		}	
CITY-ST-ZIP	5544 West HWY 318 Reddick, FL 32686		CITY-ST-ZIP	8630 N.W. F	1 34475			
TITLE ZAPOR	Officer	Delete	TITLE	Edward Stra	n C	Change	Addition	
NAME Chair			NAME	Edward 31.0	7011 Place		_	
STREET ADDRESS	5850 NW 185th St		STREET ADDRESS	6920 N W 178th Place				
CITY-ST-ZIP	Reddick, FL 32		CITY-ST-ZIP	Redfick Fl.	32686			
TITLE Chair	Officer: _			1 77	1 (0			
STREET ADDRESS	V	☐ Delete	TITLE	Ken Alax	IN N. Damon	Change	Addition	
	Mitchell Jamers	son Chairman	NAME	Ken Alax	ld N. Damon 73rd st			
CITY-ST-ZIP	Mitchell Jamers 18349 NW 6oth A	son Chairman Ave		Ken Alax	ld N. Damon 73rd st	□ Change U, Ce C		
CITY-ST-ZIP	Mitchell Jamers 18349 NW 6oth A Orange Lake, FI	son Chairman Ave	NAME STREET ADDRESS	Rev. Alara 37/9 5 E	ld N. Damon 73rd st F1 34480			
	Mitchell Jamers 18349 NW 6oth A Orange Lake, FI Officer	son Chairman Ave 32681	NAME STREET ADDRESS CITY-ST-ZIP	Rev. Olava 37/9 58 000/a	ld N. Damon : 73rd st <u>F1 34480</u> Strong,	vice C	hair	
TITLE NAME STREET ADDRESS	Mitchell Jamers 18349 NW 6oth A Orange Lake, FI	Son Chairman Ave 32681 Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Rev. Alara 37/9 5 E	ld N. Damon 73rd st F1 34480 5trong 78th Pl	vice C	hair	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mitchell Jamers 18349 NW 6oth A Orange Lake, FI Officer Arthur L. Smith Post Office Box Orange Lake, FI	Son Chairman Ave 32681 □ Delete A x 331 - 32681	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rev. Olava 37/9 58 000/a	ld N. Damon : 73rd st <u>F1 34480</u> Strong,	U, ce C	Addition	
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Mitchell Jamers 18349 NW 6oth F Orange Lake, FI Officer Arthur L. Smith Post Office Box Orange Lake, FI Officer Rennard Ivey	Son Chairman Ave 32681 Delete A 331 Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Rev. Nava 37/9 50 000/0 Treasure Jolliem. (920 NW) Reddick, F	Id N. Damon 73rd st F1 34480 5trong 78th P1. 1. 32686	U, ce C	Addition	
CITY-ST-ZIP TITLE T NAME STREET ADDRESS CITY-ST-ZIP TITLE	Mitchell Jamers 18349 NW 6oth F Orange Lake, FI Officer Arthur L. Smith Post Office Box Orange Lake, FI Officer Rennard Ivey 2100 SE 46th Te	Son Chairman Ave 32681 □ Delete Ax 331 □ 32681 □ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rev. Nava 37/9 56 0 00/9 56 Dolliem. 5 6920 NW 1 Reddick, F KEI+4 L. G	19 N. Damon 73rd st F1 34480 Strong 78 th Pl. 1. 32686	U, ce C	Addition	
CITY-ST-ZIP TITLE TAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mitchell Jamers 18349 NW 6oth F Orange Lake, FI Officer Arthur L. Smith Post Office Box Orange Lake, FI Officer Rennard Ivey 2100 SE 46th Te Gainesville, FI	Son Chairman Ave 32681 □ Delete Ax 331 □ 32681 □ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Rev. Nava 37/9 50 000/0 Treasure Jolliem. (920 NW) Reddick, F	19 N. Damon 73rd st F1 34480 Strong 78 th Pl. 1. 32686	U, ce C	Addition	
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CITY-ST-ZIP TITLE T NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE Sec	Mitchell Jamers 18349 NW 6oth F Orange Lake, FI Officer Arthur L. Smith Post Office Box Orange Lake, FI Officer Rennard Ivey 2100 SE 46th Te Gainesville, FI	Son Chairman Ave 32681 Delete 331 Delete 2 32601 Delete Control Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME	REU, Dava 37/9 50 000/0 DOILLEM. S 6920 NW / Reddick, F KEITH L. G 18373 NW OVANGE LAKE, OFFICER	Id N. Damon 73rd st F1 34480 54490 78 th P1. 1. 32686 unam T 60 m	U, ce C □ Change □ Change	Addition Addition	

Orange Lake F1 32681 Orange Lake, FL 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:

Mitchelil Jamerson QUIPED 02/28/00 352-591-5088

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #