## 2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 728511** 

Entity Name: ORCHID SPRINGS VILLAGE, NO. 400, INC.

FILED
Dec 15, 2020
Secretary of State
0180118985CC

## **Current Principal Place of Business:**

400 EL CAMINO DRIVE WINTER HAVEN, FL 33884

## **Current Mailing Address:**

P.O. BOX 400

DUNDEE, FL 33838 US

FEI Number: 59-2637333 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SAVAGE, RANDEL 400 EL CAMINO DRIVE # 104 WINTER HAVEN, FL 33884 US

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: RANDEL SAVAGE 12/15/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

Title DIRECTOR Title MEMBER AT LARGE

Name SAVAGE, RANDEL Name BATEMAN, SHIRLEY

Address 400 EL CAMINO DR 4102

WINTER HAVEN FL 33884

City-State-Zip: WINTER HAVEN FL 33884

Title TREASURER

Title PRESIDENT

Name PETERSON, ALLIE

Name PETERSON, ALLIE

Address 400 EL CAMINO DR.

Address 400 EL CAMINO DR.

108

#105

City-State-Zip: WINTER HAVEN FL 33884

 Title
 DIRECTOR

 Name
 AUSTIN, DAVE

 Title
 DIRECTOR

 Name
 NESKE, DAVID

Address 400 EL CAMINO DRIVE #206

Address 400 EL CAMINO DRIVE

208 City-State-Zip: WINTER HAVEN FL 33884

City-State-Zip: WINTER HAVEN FL 33884

Title DIRECTOR

Name RIVERA, IVETTA

Address 400 EL CAMINO DRIVE #207
City-State-Zip: WINTER HAVEN FL 33884

I hereby 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 all other like empowered.

SIGNATURE: CYNTHIA TOBIAS PRESIDENT 12/15/2020

Date