

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 728511

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

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:

BOSWELL & DUNLAP LLP
245 SOUTH CENTRAL AVENUE
BARTOW, FL 33830 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: ROBERT CHILTON

07/26/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SAVAGE, RANDEL
Address 400 EL CAMINO DR
#104
City-State-Zip: WINTER HAVEN FL 33884

Title VP
Name HARDMAN, TOM
Address 400 EL CAMINO DR.
#106
City-State-Zip: WINTER HAVEN FL 33884

Title SECRETARY
Name TOBIAS, CYNTHIA
Address 400 EL CAMINO DR.
#105
City-State-Zip: WINTER HAVEN FL 33884

Title DIRECTOR
Name AUSTIN, DAVE
Address 400 EL CAMINO DRIVE
208
City-State-Zip: WINTER HAVEN FL 33884

Title DIRECTOR
Name BATEMAN, SHIRLEY
Address 400 EL CAMINO DR # 102
City-State-Zip: WINTER HAVEN FL 33884

Title PRESIDENT
Name MAHAN, CHRIS
Address 400 EL CAMINO DR.
#115
City-State-Zip: WINTER HAVEN FL 33884

Title DIRECTOR
Name PETERSON, ALLIE
Address 400 EL CAMINO DRIVE
108
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: CHRIS M MAHAN

PRESIDENT

07/26/2020

Electronic Signature of Signing Officer/Director Detail

Date