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: OCTAVIAN DEWAYNE INGRAM

Electronic Signature of Signing Officer/Director Detail

<u>2017</u>	FLORIDA	NOT FOR I	PROFIT	<u>CORPOR</u>	ATION A	ANNUAL F	<u>REPORT</u>	

DOCUMENT# N04000004732

Entity Name: ORANGE COUNTY SERVICES INC.

Current Principal Place of Business:

7802 HIDDEN HOLLOW DR 107 ORLANDO, FL 32822

Current Mailing Address:

7802 HIDDEN HOLLOW DR ORLANDO, FL 32822 US

FEI Number: 22-3900911

Name and Address of Current Registered Agent:

INGRAM, DEWAYNE D 2000 BUCHANAN BAY CIR 107 ORLANDO, FL 32839 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	: OCTAVIAN DEWAYNE INGRAM	05/01/2017						
	Electronic Signature of Registered Agent		Date					
Officer/Director Detail :								
Title	DIR	Title	DIR					
Name	INGRAM, GAIL D	Name	INGRAM, DEWAYNE O					
Address	2603 AVE Q	Address	2101 SOUTH CONWAY RD SUITE 2001					
City-State-Zip:	FORT PIERCE FL 34950	City-State-Zip:	ORLAND FL 32812					
Title	DIR							
Name	PORTER, STEPHANIE							
Address	7920 SAPPHIRE LANE							
City-State-Zip:	ORLANDO FL 32822							

VP

Certificate of Status Desired: No

FILED May 01, 2017 Secretary of State CC3098798447

> 05/01/2017 Date