## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009725

Entity Name: ORANGE LAKE COUNTRY CLUB VILLAS CONDOMINIUM

ASSOCIATION V, INC.

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

8505 W IRLO BRONSON MEMORIAL HWY

KISSIMMEE, FL 34747

## **Current Mailing Address:**

8505 W IRLO BRONSON MEMORIAL HWY KISSIMMEE, FL 34747

FEI Number: 61-1588733 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: EILEEN CHADDOCK 03/10/2016

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

HWY

Title **PRESIDENT** Title VΡ

Name HARRILL, DON L Name WILSON, SPENCE L

Address 8505 W. IRLO BRONSON MEMORIAL Address 8505 W. IRLO BRONSON MEMORIAL

HWY

KISSIMMEE FL 34747 City-State-Zip: City-State-Zip: KISSIMMEE FL 34747

Title S/T Title **DIRECTOR** 

THOMPSON, MICHAEL J Name Name HOLTH, RODNEY E

Address 8505 W. IRLO BRONSON MEMORIAL Address 8505 W IRLO BRONSON MEMORIAL

HWY

KISSIMMEE FL 34747 KISSIMMEE FL 34747 City-State-Zip: City-State-Zip:

Title **DIRECTOR** 

Name CASEY, RONALD L

HWY

8505 W IRLO BRONSON MEMORIAL Address

HWY

City-State-Zip: KISSIMMEE FL 34747

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: MICHAEL J THOMPSON

Electronic Signature of Signing Officer/Director Detail

**SECRETARY** 

03/10/2016 Date

**FILED** Mar 10, 2016

**Secretary of State** 

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