

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09456

Entity Name: ORANGE MANOR EAST MOBILE HOME OWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**52 TEMPLE CIRCLE
ORANGE MANOR EAST MHP.
WINTER HAVEN, FL 33884**Current Mailing Address:**52 TEMPLE CIRCLE
ORANGE MANOR EAST MHP.
WINTER HAVEN, FL 33884 US**FEI Number:** 59-2543681**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH, GWEN J
52 TEMPLE CIRCLE
ORANGE MANOR EAST MHP.
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:** GWEN J. SMITH

03/01/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	GRAY, CAROL
Address	72 TEMPLE CIRCLE ORANGE MANOR EAST
City-State-Zip:	WINTER HAVEN FL 33884

Title	VP
Name	WARNCKE, JIM
Address	147 MANDARIN DRIVE ORANGE MANOR EAST
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	WHITE, MARY
Address	112 PINEAPPLE DR.
City-State-Zip:	WINTER HAVEN FL 33884

Title	PRES
Name	SMITH, GWEN
Address	52 TEMPLE CIRCLE ORANGE MANOR EAST MHP.
City-State-Zip:	WINTER HAVEN FL 33884

Title	SECRETARY
Name	GILBRIDE, DEANNE
Address	66 TEMPLE CIRCLE
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	FULLER, ROGER
Address	203 ORANGE MANOR DRIVE
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: GWEN J. SMITH

PRESIDENT

03/01/2017

Electronic Signature of Signing Officer/Director Detail

Date