

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000004288

**FILED**  
**Feb 02, 2018**  
**Secretary of State**  
**CC1171004203**

**Entity Name:** ORANGE COUNTYWATCH FL, INC.

**Current Principal Place of Business:**

717 31ST STREET  
ORLANDO, FL 32805

**Current Mailing Address:**

717 31ST STREET  
ORLANDO, FL 32805

**FEI Number:** 46-5310908

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

O'DELL, EMMETT  
717 31ST STREET  
ORLANDO, FL 32805 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name HEAD, DOUG  
Address 1415 W. ROBINSON STREET  
City-State-Zip: ORLANDO FL 32805

Title SEC  
Name O'DELL, EMMETT  
Address 717 31ST STREET  
City-State-Zip: ORLANDO FL 32805

Title TRES  
Name ELLENBURG, CINDY  
Address 4251 WINDY ACRES ROAD  
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR  
Name CAPEN, RAE  
Address 3 CAPEHART DRIVE  
City-State-Zip: ORLANDO FL 32807

Title DIRECTOR  
Name FERNANDEZ, EDDIE  
Address 4409 HOFFNER AVENUE  
#312  
City-State-Zip: ORLANDO FL 32812

Title DIRECTOR  
Name RUCKER, DAVID  
Address 4557 FRISCO CIRCLE  
City-State-Zip: ORLANDO FL 32808

Title VC  
Name GIBSON, KATHY  
Address 3411 SPOTTED FAWN DRIVE  
City-State-Zip: ORLANDO FL 32817

*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:** EMMETT O'DELL

**SECRETARY**

**02/02/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date