

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001358

Entity Name: THE ORCHARDS COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**C/O AMERICAN PROPERTY MANAGEMENT
8825 TAMIAMI TRAIL EAST
NAPLES, FL 34113**Current Mailing Address:**C/O AMERICAN PROPERTY MANAGEMENT
8825 TAMIAMI TRAIL EAST
NAPLES, FL 34113 US**FEI Number:** 65-0475569**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AMERICAN PROPERTY MANAGEMENT
8825 TAMIAMI TRAIL EAST
NAPLES, FL 34113 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	S	Title	P
Name	KIPYBIDA, MARTHA	Name	SLUSS, ROBERT
Address	7912 GARDNER DRIVE	Address	7672 CITRUS HILL LANE
City-State-Zip:	NAPLES FL 34109	City-State-Zip:	NAPLES FL 34109
Title	T	Title	VP
Name	KING, HILARY	Name	BRETZ, DENNIS
Address	7681 CITRUS HILL LANE	Address	7876 GARDNER DRIVE
City-State-Zip:	NAPLES FL 34109	City-State-Zip:	NAPLES FL 34109
Title	D	Title	D
Name	FEENEY, SEAN	Name	GRAZIANO, ELIZABETH
Address	7913 GARDNER DRIVE	Address	7633 CITRUS HILL LANE
City-State-Zip:	NAPLES FL 34109	City-State-Zip:	NAPLES FL 34109
Title	D		
Name	STROUBLE, DAVID		
Address	7798 GARDNER DRIVE 101		
City-State-Zip:	NAPLES FL 34109		

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: ROBERT SLUSS**PRESIDENT****04/08/2013**

Electronic Signature of Signing Officer/Director Detail

Date