

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000006635

**Entity Name:** ORANGE LAKE COMMUNITY CLUB, INC.

**Current Principal Place of Business:**

18349 NW 60 AVE  
ORANGE LAKE, FL 32681

**Current Mailing Address:**

P O BOX 346  
ORANGE LAKE, FL 32681

**FEI Number: 59-3626572**

**Certificate of Status Desired: No**

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

JAMERSON, MITCHELL  
18349 NW 60 AVE  
ORANGE LAKE, FL 32681 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 VC  
Name MILLER, JR, LUTHER REV  
Address 3888 N.E. 55TH COURT  
City-State-Zip: SILVER SPRINGS FL 34488

Title C  
Name MCFADDEN, JOESPH REV  
Address 5920 NW 185TH ST  
City-State-Zip: ORANGE LAKE FL 32681

Title PRES  
Name JAMERSON, MITCHELL LMR.  
Address 18349 NW 60 TH AVE  
City-State-Zip: ORANGE LAKE FL 32681

Title TD  
Name SMITH, TERRY MR.  
Address 5921 NW 185TH ST  
City-State-Zip: ORANGE LAKE FL 32681

Title TREA  
Name JAMES, NARANJA MS  
Address 18580 NW 60TH AVE  
City-State-Zip: REDDICK FL 32686

Title ST  
Name JACKSON, EVELYN MS  
Address 10120 NW 318 HWY  
City-State-Zip: REDDICK FL 32686

*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: EVELYN JACKSON**

**SECRETARY**

**04/04/2016**

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

\_\_\_\_\_  
Date