

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 09, 2004 8:00 am**  
**Secretary of State**

03-09-2004 90045 020 \*\*\*150.00

**DOCUMENT # 496329**

1. Entity Name

ORA CORPORATION



Principal Place of Business

825 CENTER ST.  
#22D  
JUPITER FL 33458  
US

Mailing Address

825 CENTER ST.  
#22D  
JUPITER FL 33458  
US

2. Principal Place of Business

11482 W. Bayshore Dr.

3. Mailing Address

11482 W. Bayshore Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CRYSTAL RIVER, FLORIDA

City & State

CRYSTAL RIVER, FLORIDA

4. FEI Number

11-2380094

Applied For

Not Applicable

Zip

34429

Country

US

Zip

34429

Country

US

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, REBECCA B  
825 CENTER ST  
#22D  
JUPITER FL 33458

7. Name and Address of New Registered Agent

Name

JOHNSON, Rebecca B

Street Address (P.O. Box Number is Not Acceptable)

11482 W. Bayshore Dr.

City

CRYSTAL RIVER

FL

Zip Code

34429

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Rebecca B. JOHNSON

VICE PRESIDENT

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/4/04

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> Delete
NAME	KING, ROBERT O	
STREET ADDRESS	825 CENTER ST. #22D	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	PTDS	<input type="checkbox"/> Delete
NAME	BUCKHOUT, ANN	
STREET ADDRESS	289 STEPHEN HANDS PATH	
CITY-ST-ZIP	EAST HAMPTON NY 61937	
TITLE	VAS	<input type="checkbox"/> Delete
NAME	JOHNSON, REBECCA B	
STREET ADDRESS	825 CENTER ST. #22D	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BUCKHOUT, Chris	
STREET ADDRESS	38 Harbor View Lane	
CITY-ST-ZIP	EAST HAMPTON, NY 11937	
TITLE	PTDS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUCKHOUT, ANN	
STREET ADDRESS	289 STEPHEN HANDS PATH	
CITY-ST-ZIP	EAST HAMPTON, NY 11937	
TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, Robert O.	
STREET ADDRESS	11482 W. Bayshore Dr.	
CITY-ST-ZIP	CRYSTAL RIVER FL 34429	
TITLE	VAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, Rebecca B.	
STREET ADDRESS	11482 W. Bayshore Dr.	
CITY-ST-ZIP	CRYSTAL RIVER FL 34429	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ann Buckhout PRESIDENT

3/4/04

(631) 725-0800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #