FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90099 002 ***150.00

DOCUMENT # 508088

ORANGE LAKE GARAGE INC.

Principal Place	e of Business	Mailing Address				1			
10714 WALSING	SHAM ROAD	10714 WALSINGHAM R	OAD						
LARGO FL 3464	18	LARGO FL 34648						0.004.05	
							OT WRITE IN THE	SPACE	
						3. Date incorporated or	Qualited		
						07/29/1976			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			olied For
21		26	_,			59-1684727			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status D	esired	\$8.75 A	
22		27				J. Commonto di Ciardo B		Fee Re	quired
City & State	e	City & State				6. Election Campaign Fi	nancing	\$5.00	
23		28				_Trust Fund.Contribution	on	Added to	Fees
Zip_	Country	Zip		Country		8. This corporation owes	the current year I		
₂₄ 337	78 25	29 3377	30			Personal Property Ta	x.,	Yes	□No
	9. Name and Addres	s of Current Registered Agent				10. Name and Address	of New Registere	d Agent	
				81	Name				
	gle, John P.			82	Stroot Add	ress (P.O. Box Number is No	t Acceptable)		*****
1071	4 Walsingham Roa	.D		62	Street Addi	ress (F.O. DOX Number is No	(Acceptable)		
LARG	GO FL 34648			83					
				84	City			. 85 Zip C	Code
					•		F		
11. Pursuant t	to the provisions of Section	ons 607.0502 and 607.1508, Florida S in the State of Florida. Such change w	tatutes, the	e above	-named corp	poration submits this statement	nt for the purpose	of changing its	registered sistered
office or re	egistered agent, or both, i im familiar with, and accet	pt the obligations of, Section 607.0505	, Florida S	Statutes.		Company of the state of the sta	by decope are upp		,
_		•		- +	y West	the particular section of the second			
SIGNATURE	Signature, typed or printed name of	of registered agent and title if applicable. (NOTE: Regist	tered Agent	signature require	ed when reinstating)	DATE		
12.	·	FICERS AND DIRECTORS	1	13.		ADDITIONS/CHANGE:	S TO OFFICERS A		
	·	FICERS AND DIRECTORS		13. 1 TITLE		ADDITIONS/CHANGE	S TO OFFICERS A	AND DIRECTO	RS IN 12
12.	OF		E 1.			ADDITIONS/CHANGE	S TO OFFICERS A		
12. TITLE NAME	VPS OF		E 1.	.1 TITLE	ADDRESS	ADDITIONS/CHANGE	S TO OFFICERS A		
12. TITLE NAME STREET ADDRESS	VPS LYNDA F BROGLE 10764-126 AVE N		E 1.	.1 TITLE .2 NAME .3 STREET		ADDITIONS/CHANGE	S TO OFFICERS A		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS LYNDA F BROGLE 10764-126 AVE N LARGO FL		E 1. 1. 1. 1.	.1 TITLE .2 NAME		ADDITIONS/CHANGE:	S TO OFFICERS A		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VPS LYNDA F BROGLE 10764-126 AVE N LARGO FL PT	□ DELETI	E 1. 1. 1. 1. E 2.	1 TITLE 2 NAME 3 STREET 4 CITY-ST		ADDITIONS/CHANGE:	S TO OFFICERS A	☐ Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VPS LYNDA F BROGLE 10764-126 AVE N LARGO FL PT JOHN M BROGLE	□ DELETI	E 1. 1. 1. 1. E 2.	.1 TITLE 2 NAME .3 STREET .4 CITY-ST1 TITLE .2 NAME	- ZIP	ADDITIONS/CHANGE:	S TO OFFICERS A	☐ Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VPS LYNDA F BROGLE 10764-126 AVE N LARGO FL PT JOHN M BROGLE 10764-126 AVE N	□ DELETI	E 1. 1. 1. 1. E 2. 2.	.1 TITLE .2 NAME .3 STREET .4 CITY-ST .1 TITLE .2 NAME	- ZIP ADDRESS	ADDITIONS/CHANGE:	S TO OFFICERS A	☐ Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS LYNDA F BROGLE 10764-126 AVE N LARGO FL PT JOHN M BROGLE	☐ DELETI	E 1. 1. 1. 1. E 2. 2. 2. 2.	.1 TITLE .2 NAME .3 STREET4 CITY-ST1 TITLE .2 NAME .3 STREET4 CITY-ST.	- ZIP ADDRESS	ADDITIONS/CHANGE:	S TO OFFICERS A	Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VPS LYNDA F BROGLE 10764-126 AVE N LARGO FL PT JOHN M BROGLE 10764-126 AVE N	□ DELETI	E 1. 1. 1. 1. 1. E 2. 2. 2. 2. E 3.	.1 TITLE 2 NAME .3 STREET. 4 CITY-ST. 11 TITLE 12 NAME .3 STREET. 4 CITY-ST. 11 TITLE	- ZIP ADDRESS	ADDITIONS/CHANGE:	S TO OFFICERS A	☐ Change	Addition
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T12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VPS LYNDA F BROGLE 10764-126 AVE N LARGO FL PT JOHN M BROGLE 10764-126 AVE N	☐ DELET	E 1. 1. 1. 1. 1. 2. 2. 2. 2. 3. 3. 3. 3. 4. 4. 4. 4. 5. 5.	1 TITLE 2 NAME 3 STREET. 4 CITY-ST. 1 TITLE 12 NAME 13 STREET. 1 4 CITY-ST. 1 TITLE 12 NAME 13 STREET 14 CITY-ST. 1 TITLE 12 NAME 13 STREET 14 CITY-ST. 1 TITLE 14 CITY-ST. 14 TITLE 15 NAME 15 NAME 16 NAME 17 NAME 18 NAME	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 2- ZIP ADDRESS ADDRESS	ADDITIONS/CHANGE:	S TO OFFICERS A	☐ Change ☐ Change ☐ Change	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS LYNDA F BROGLE 10764-126 AVE N LARGO FL PT JOHN M BROGLE 10764-126 AVE N	☐ DELET	E 1. 1. 1. 1. 1. 2. 2. 2. 2. 3. 3. 3. 3. 4. 4. 4. 4. 5. 5. 5.	1 TITLE 2 NAME 3 STREET 4 CITY-ST 1 TITLE 2 NAME 3 STREET 4 CITY-ST 3 TITLE 12 NAME 13 STREET 14 CITY-ST 14 TITLE 12 NAME 13 STREET 14 CITY-ST 15 TITLE 15 TITLE 16 TITLE 17 NAME 18 TITLE 18 TI	ADDRESS 1- ZIP ADDRESS 1- ZIP ADDRESS 2- ZIP ADDRESS ADDRESS	ADDITIONS/CHANGE:	S TO OFFICERS A	☐ Change ☐ Change ☐ Change	Addition Addition Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the examption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP