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

DOCUMENT # 694223

1. Corporatio	n Name					1				
ORANGE HOLDINGS, INC.										
(1 168/18 8/18 16/14 6/16/1				
Principal Place of Business Mailing Address								At At A MINIST		Ett Brieft (BA)
431 N GRANDVIEW AVENUE 431 N GRANDVIEW AVENUE										
C/O JUNE L. WALLACE C/O JUNE L. WALLACE						PO MOT HIDITE IN THE SEASE				
DAYTONA BEACH FL 32118 DAYTONA BEACH FL 32118						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
l							iea			
2 Principal P	lace of Business	2a. Mailing Address				07/13/1981 4. FEI Number	·		1 A	olied For
⊢	iace of pusitiess	26				59-2168085		-		Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						39-2 100000		\$2		dditional
22		27				5. Certifcate of Status Desired	:	·	e Re	
City & State City & State					 -	6. Election Campaign Financi				Mav Be
23	28					Trust Fund Contribution	a 🗆			Fees
Zip	Country	Zip	Countr	ry		8. This corporation owes the	current vear Ir	ntangible		
24	25	29	30			Personal Property Tax.	, , , , , , , , , , , , , , , , , , , ,	Yes	3	∏No
9. Name and Address of Current Registered Agent						10. Name and Address of Ne	w Registered	Agent		
				1 1	Name					
WALLACE, JUNE L				2 :	Street Addre	ess (P.O. Box Number is Not Acc	eptable)			
431 N GRANDVIEW AVENUE										
DAYTONA BEACH FL 32118				3						
				4 (City			85	Zip C	ode
				۱,	Oily		Fl	_ 83	Zip O	OGE
,11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statute:	s, the abov	ve-n	named corpo	pration submits this statement for	the purpose o	f changir	ng its i	egistered
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Flori	da Statute:	y un IS.	e corporation	ins board of directors, i flereby ac	cept the appo	inunent.	as rey	1916160
SIGNATURE	_									
					ignature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.	OFFICERS AND DIRECTORS DELETE		13.			ADDITIONS/CHANGES TO	OFFICERS A	ND DIRE		Addition
TITLE	PTD		1.1 TITLE					[] Cita	ange	
NAME			l	1.2 NAME 1.3 STREET ADDRESS						
STREET ADDRESS										
CITY+ST-ZIP				1.4 CITY-ST-ZIP				☐ Cha	nna	Addition
NAME				2.2 NAME					inge	
)	the state of the s			2.3 STREET ADDRESS						
STREET ADDRESS				2.4 CITY-ST-ZIP						
CITY-ST-ZIP				3.1 TITLE		 -		☐ Cha	nne	Addition
NAME			3.2 NAME						90	
STREET ADDRESS				3.3 STREET ADDRESS						
CITY-ST-ZIP				3.4. CITY-ST-ZIP						٠.
TITLE				4.1 TITLE		·		☐ Cha	ange	Addition
NAME				4. 2 NAME				_		-
STREET ADDRESS			1	4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY-5							
TITLE	-	DELETÉ	5.1 TITLE		-"			Cha	ange	Addition
NAME	•		5.2 NAME						-	
STREET ADDRESS			5.3 STREE	ET AD	DDRESS					

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption 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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

☐ Change

FILED

Jan 22, 1999 8:00am

Secretary of State 01-22-1999 90050 006 ***150.00

CR2E034 (11/98)

☐ Addition