

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 704512

1. Entity Name

ORANGE BLOSSOM POMONA GRANGE NO. 6 INC.

Principal Place of Business

% MARION GRANGE HALL  
STETSON ST.  
BELLEVUE FL 34420  
US

Mailing Address

34951 LEARN RD.  
LEESBURG FL 34788-8548

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7214714

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BEATTY, EVA  
34951 LEARN RD.  
LEESBURG FL 34788-8548

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
NAME MAXHAM, GEORGE ☒ Delete  
STREET ADDRESS 8640 E. KEATING PK ST. LOT 272  
CITY-ST-ZIP FLORAL CITY FL 34436-2879

TITLE D WILMA KRIESKI ☐ Change ☒ Addition  
NAME  
STREET ADDRESS 6511 N. TAMARIND AVE.  
CITY-ST-ZIP HERNANDO, FL. 34442

TITLE S  
NAME BEATTY, EVA ☐ Delete  
STREET ADDRESS 34951 LEARN RD.  
CITY-ST-ZIP LEESBURG FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T  
NAME DESELLEMS, FLORENCE ☐ Delete  
STREET ADDRESS 1981 SE 172ND AVE  
CITY-ST-ZIP SILVER SPRINGS FL 34488

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME LAW, ROBERT ☐ Delete  
STREET ADDRESS 3382 110TH ST. S.E.  
CITY-ST-ZIP BELLEVUE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME WHIDDEN, INA ☐ Delete  
STREET ADDRESS 13896 SE 53RD AVE  
CITY-ST-ZIP SUMMERFIELD FL 34491

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE P  
NAME MAXHAM, ANGELA ☒ Delete  
STREET ADDRESS 8640 E. KEATING PK LOT 272  
CITY-ST-ZIP FLORAL CITY FL 34436-2879

TITLE P JAMES F. BEATTY ☐ Change ☒ Addition  
NAME  
STREET ADDRESS 34951 LEARN RD.  
CITY-ST-ZIP LEESBURG, FL. 34788-8548

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 617, 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:

SIGNATURE REQUIRED *Eva Beatty*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR EVA BEATTY

4/24/01 352/742-0862  
Date Daytime Phone #

FILED  
Apr 30, 2001 8:00 am  
Secretary of State

04-30-2001 90393 011 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)