

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2002 8:00 am
Secretary of State

04-21-2002 90908 044 ****61.25

DOCUMENT # 704512

1. Entity Name

ORANGE BLOSSOM POMONA GRANGE NO. 6 INC.

Principal Place of Business

Mailing Address

% MARION GRANGE HALL
 STETSON ST.
 BELLEVUE FL 34420
 US

34951 LEARN RD.
 LEESBURG FL 34788-8548

2. Principal Place of Business

3. Mailing Address

HISTORICAL SOCIETY BLDG

Suite, Apt. #, etc.

5920 SE STETSON RD.

Suite, Apt. #, etc.

City & State

BELLEVUE, FL

City & State

4. FEI Number

23-7214714

Applied For

Not Applicable

Zip

34420

Country

USA

Zip

Country

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

BOND, EVA J.

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

34951 LEARN RD.

City

LEESBURG

FL

Zip Code

34788

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 **EVA J. BOND, Sec.**

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

(NOTE: Registered Agent signature required when reinstating)

APRIL 11, 2002

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 ☐ Delete
 NAME **D**
 STREET ADDRESS **KRIESKI, WILMA**
 CITY-ST-ZIP **6511 N. TAMARIND AVE
 HERNANDO FL 34442**

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

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

TITLE ☒ Change ☐ Addition
 NAME **S**
 STREET ADDRESS **BOND, EVA J.**
 CITY-ST-ZIP **34951 learn rd.
 LEESBURG, FL 34788-8548**

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

TITLE ☐ Change ☒ Addition
 NAME **T**
 STREET ADDRESS **LAW, ROBERT**
 CITY-ST-ZIP **P.O. BOX 1042
 BELLEVUE, FL 34421**

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

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **GRAY, HELEN**
 CITY-ST-ZIP **4 OAK HOLLOW DR.
 BEVERLY HILLS, FL 34465**

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

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

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **BEATTY, JAMES F**
 CITY-ST-ZIP **34951 LEARN RD
 LEESBURG FL 34788-8548**

TITLE ☐ Change ☐ 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 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: **EVA J. BOND** *Eva J. Bond, Sec.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 11, 2002 352/742-0862

Date

Daytime Phone #

CR2E037 (9/01)