

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90023 023 ****61.25

DOCUMENT # 722669

1. Entity Name

ORANGE GROVE PARK CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

ATTN: DOROTHY KODZIS, TREASURER
 60 TEMPLE COURT
 LEHIGH ACRES FL 33936

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 60 TEMPLE COURT
 LEHIGH ACRES FL 33936

00001360



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1381630

Applied For

Not Applicable

Zip

Country

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

**BODURA, MICHAEL
 60 TANGERINE CT
 LABELLE FL 33935**

Name

JOHN YANEK JR.

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

44 TEMPLE CT

City

Lehigh Acres

FL

Zip Code

33936

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

JOHN YANEK JR.

3-5-01

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 NAME STREET ADDRESS CITY-ST-ZIP	P YANEK, JOHN JR 44 TEMPLE COURT LEHIGH ACRES FL 33936	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HANK, WALTER 8 TANGELO LEHIGH ACRES FL 33936	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BODURA, MICHAEL 60 TANGERINE COURT LEHIGH ACRES FL 33936	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROTON, BOBBIE 1 TEMPLE COURT LEHIGH ACRES FL 33936	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINGER, JESSE 49 TANGERINE CT. LEHIGH ACRES FL 33936	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KODIZ, DOROTHY M 130 BROOKSIDE STREET LEHIGH ACRES FL 33936	☒ Delete

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

KODZIS DOROTHY M
130 BROOKSIDE ST
LEHIGH ACRES, FL 33936

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/01

Date

Daytime Phone #

CR2E037 (10/00)