2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2007 8:00 am
Secretary of State
05-04-2007 90066 027 ****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	ATTN: RUSSELL KING, PRES. 60 TEMPLE COURT LEHIGH ACRES FL 33936

1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
ATT: REBA MONEY, PRES.	ATT: REBA MONEY, PRES.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1381630 ☐ 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
KING, RUSSELL 15 HAMLIN CT LEHIGH ACRES FL 33936	Name: MONEY, REBA Street Address (P.O. Box Number is Not Acceptable): 35 HAMLIN 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Reba Money — Reba Money Pres — 4-23-07
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
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KING, RUSSELL 15 HAMLIN CT LEHIGH ACRES FL 33936	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HANDLEY, MARVIN 4 HAMLIN CT. LEHIGH ACRES, FL 33936	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MONEY, REBA 35 HAMLIN CT LEHIGH ACRES FL 33936	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MONEY, REBA 35 HAMLIN CT. LEHIGH ACRES, FL 33936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARAVENTANO, BERTHA S 35 TANGERINE CT LEHIGH ACRES FL 33936	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FESTGER, JOHN 13 HAMLIN CT LEHIGH ACRES FL 33936	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SANDERS, DORIS 26 HAMLIN CT. LEHIGH ACRES, FL 33936	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MEDHURST, CRECENCIA 54 HAMLIN CT LEHIGH ACRES FL 33936	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HALL, WILLIAM 10521 PUTNAM CT LEHIGH ACRES FL 33936	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: William Hall — William Hall, Treas. — 4-23-07 — 239-369-6133
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #