

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northerm
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

MAY -1 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **727305** (5)
1. Corporation Name
ORANGE TREE PROPERTY OWNERS' ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**6068 S. APOPKA VINELAND RD
SUITE 5
ORLANDO FL 32819**

3. Date Incorporated or Qualified **08/07/1973** 3a. Date of Last Report **04/15/1994**

4. FEI Number **59-1725483** Applied For ☐ Not Applicable ☒

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. # etc 26 Suite, Apt. #, etc

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 29 Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under s. 195.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PAGE, FRANK L., C.P.A.
6068 SOUTH APOPKA-VINELAND RD.
SUITE 5
ORLANDO FL 32819**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **UNDERWOOD, SANDY**
STREET ADDRESS **6709 BITTERSWEET LN**
CITY, ST, ZIP **ORLANDO, FL 0 FL 32819**

11 TITLE **Secretary/Director** ☒ Change ☐ Addition

TITLE **VD**
NAME **BORGAN, MARY**
STREET ADDRESS **7719 CLEMENTINE WAY**
CITY, ST, ZIP **ORLANDO, FL 0**

21 TITLE **Vice President/Director** ☐ Change ☒ Addition
22 NAME **DAVE SUTHERLAND**
23 STREET ADDRESS **6842 Bittersweet Lane**
24 CITY, ST, ZIP **Orlando, FL 32819**

TITLE **SD**
NAME **POLINCHOCK, VINCENT**
STREET ADDRESS **6818 BITTERSWEET LN**
CITY, ST, ZIP **ORLANDO FL 32819**

31 TITLE **Director** ☒ Change ☐ Addition

TITLE **D**
NAME **SIMON, BOB**
STREET ADDRESS **7700 ORANGE TREE LANE**
CITY, ST, ZIP **ORLANDO, FL 0**

41 TITLE **DIRECTORS** ☐ Change ☒ Addition
42 NAME **Buckley, Frank Les**
43 STREET ADDRESS **6703 Bittersweet Lane**
44 CITY, ST, ZIP **Orlando, FL 32819**

TITLE **TD**
NAME **LINDE, LOREE**
STREET ADDRESS **6613 BITTERSWEET LANE**
CITY, ST, ZIP **ORLANDO, FL 0**

51 TITLE **Director** ☒ Change ☐ Addition

TITLE **B-PRESIDENT**
NAME **RANKIN, LARRY**
STREET ADDRESS **6575 BITTERSWEET LANE**
CITY, ST, ZIP **ORLANDO FL**

61 TITLE **President/Director** ☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Loree E. Linde

4/12/95