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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

727305

(5)

ORANGE TREE PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place 6068 S. APOI SUITE 5	of Business PKA VINELAND RD		alling Address SOE8 S. APOPKA VINELAND RD SUITE 5							
ORLANDO FL 32819		ORLANDO FL 32819				3. Date Incorporated or Qualified				
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For				
21		26			59-1725483	Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required				
City & State		City & State			Election Campaign Financing Trust Fund Contribution			May Be		
Z ip	Country	Zip Country				Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	30			Florida Statutes Yes \(\sum_{\text{Y}} \) Yes \(\sum_{\text{Y}} \) No				
	9, Name and Address of Current	t Registered Agent				10. Name and Address of New Re	gistered Age	nt		
				B1	Name	•				
PAGE, FRANK L., C.P.A.				82 Street Address (P.O. Box Number is Not Acceptable)						
6068 SOUTH APOPKA-VINELAND RD.				83						
SUITE 5										
UHLANU	O FL 32819			84	City		FL I	35 Zip	Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.										
SIGNATURE Signature typed or printed name of registered agent and bitle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
Signature hypeo or printed name or registered agent and order it approache. INCITE: HE 12. OFFICERS AND DIRECTORS				rigen	i signature recioner	ADDITIONS/CHANGES TO OFFI		RECTO	RS IN 12	
TITLE	SD	. DELETE	DELETE 1.1 TI					Change	☐ Addition	
NAME	UNDERWOOD, SANDY		1.2 NAME							
STREET ADDRESS	6709 BITTERSWEET LN		1.3 \$		ADDRESS					
CITY-ST-ZIP	ORLANDO, FL 0 FL	ORLANDO, FL O FL		1.4 CITY - ST - ZIP					F7 1700	
TITLE	VPD □ DELETE			2.1 TITLE			Ш	Change	Addition :	
NAME	SUTHERLAND, DAVE		2.2 N/							
STREET ADDRESS	6842 BITTERSWEET LANE		2.3 STREET ADDRESS							
CITY-ST-ZIP TITLE	ORLANOD, FL 0			2 4 CITY-ST-ZIP 31 TITLE				Change	Addition	
NAME	_	U —		32 NAME			υ,	,		
STREET ADDRESS	POLINOHOCK, VINCENT			3.3 STREET ADDRESS						
CITY-ST-ZIP		DO 10 DILIEUSMEET FIA		3.4. CITY-ST-ZIP						
TITLE	ONDANDO FE	DELETE	4.1 TI		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PRESIDENT	A	Change	☐ Addition	
NAME	BECKLEY, FRAN & LES		4.21	IAME		President Beackley, LES				
STREET ADDRESS	6703 BITTESWEET LANE		4.3 STRE		ADDRESS	.				
CITY-ST-ZIP	ORLANDO, FL 0	DO, FL 0		CITY - ST - ZIP						
TITLE	D	DELETE 5.1		TLE		Treasurer/D	Σ Δ(Change	☐ Addition	
NAME	LINDE, LOREE	NDE, LOREE 52		2 NAME			-			
STREET ADDRESS	6613 BITTERSWEET LANE			5.3 STREET ADDRESS						
CITY-ST-ZIP	ORLANDO, FL 0			TY-S	T-ZIP			<u> </u>	F-10-10-10-10-10-10-10-10-10-10-10-10-10-	
TITLE	DP	<i>–</i>		.1 TITLE			LI	Change	Addition	
NAME	rankin, larry			6.2 NAME						
STREET ADDRESS	6575 BITTERSWEET LANE				ADDRESS					
CITY-ST-ZIP	ORLANDO FL	John Abie Elien in the best of the	6.4 C	ITY-S	T-ZIP	for the exemption stated in Section 119.0	17/2\/L\ Elasti	n Etoba	on I further	
certify tha	by certify that the information supplied vit the information indicated on this annu	vitir triis illing is voluntanly furf ial report or supplemental ann	iisrieu ario iual report	is tru	s not quality i	ate and that my signature shall have the	same legal eff	act as if	made under	