


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90020 035 ****61.25

DOCUMENT # 735078					
1. Entity Name ORANGE ESTATES CIVIC ASSOCIATION, INC.					
Principal Place of Business 5400 SEMINOLE BLVD. SEMINOLE, FL 34642-7426			Mailing Address 5105 104TH WAY N ST PETERSBURG, FL 33708 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 4961 104th Way N.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State St. Petersburg FL		4. FEI Number 59-0211574	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33708		Country U.S.			
8. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
JOHNSON, PHILLIP 5105 104TH WAY N SAINT PETERSBURG, FL 33708			Name <u>Lee Anne Burney</u> Street Address (P.O. Box Number is Not Acceptable) <u>4961 104th Way N.</u> City <u>St. Petersburg</u> FL Zip Code <u>33708</u>		
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 <u>Lee Burney</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			(NOTE: Registered Agent signature required when reinstating)		DATE <u>4/18/08</u>
Filing Fee Is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMPP, GINGER		NAME	Lee Anne Burney	
STREET ADDRESS	10644 53RD AVE N		STREET ADDRESS	4961 104th Way N.	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33708		CITY-ST-ZIP	St. Petersburg, FL 33708	
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKER, GREG		NAME	Patricia Loop	
STREET ADDRESS	10380 53 AVE NO		STREET ADDRESS	1523 51st Terrace N.	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33708		CITY-ST-ZIP	St. Petersburg, FL 33708	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRESTON, KITTY		NAME	Toni Yost	
STREET ADDRESS	5823 102ND ST N		STREET ADDRESS	10430 50 Ave. C. N.	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33708		CITY-ST-ZIP	St. Petersburg, FL 33708	
TITLE	TPD	<input checked="" type="checkbox"/> Delete	TITLE	TPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURG, GARY&LEE ANN		NAME	Marilyn Murphy	
STREET ADDRESS	4961 104TH WAY N		STREET ADDRESS	4961 104th Way N.	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33708		CITY-ST-ZIP	St. Petersburg, FL 33708	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 Lee Burney 4/18/08