

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 20, 2004 8:00 am
Secretary of State

05-20-2004 90005 033 ****61.25

DOCUMENT # 756332

1. Entity Name

ORCHID LAKE VILLAGE CIVIC ASSOCIATION, INC.



Principal Place of Business

7425 ORCHID LAKE ROAD
NEW PORT RICHEY FL 34653
US

Mailing Address

7425 ORCHID LAKE ROAD
NEW PORT RICHEY FL 34653
US

11010001



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2101365

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~RUSSO, LOUISE~~
~~7729 BRAMBLEWOOD LN~~
~~PORT RICHEY FL 34668~~

7. Name and Address of New Registered Agent

Name CAROL ANN BAYER

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

8015 CEDAR RUN

Port Richey

City

FL

Zip Code

34668

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

Carol Ann Bayer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/10/04

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE ☐ Delete
NAME SMITH, WINI B
STREET ADDRESS 8121 MOCKERNUT LANE
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE ☐ Delete
NAME FINLAND, PATTY
STREET ADDRESS 7844 ROYAL STEWART DR
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE ☒ Delete
NAME RUSSO, LOUISE
STREET ADDRESS 7729 BRAMBLEWOOD LN
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE ☐ Delete
NAME PATRICK, RENEE
STREET ADDRESS 7902 ROYAL STEWART DRIVE
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE ☐ Delete
NAME MAGUIRE, ANTOINETTE
STREET ADDRESS 7336 CHINABERRY COURT
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP ☐ Change ☒ Addition
NAME PAUL BAYER
STREET ADDRESS 8015 CEDAR RUN
CITY-ST-ZIP Port Richey, FL 34668

TITLE SECT ☐ Change ☒ Addition
NAME CAROL ANN BAYER
STREET ADDRESS 8015 CEDAR RUN
CITY-ST-ZIP Port Richey, FL 34668

TITLE T ☐ Change ☒ Addition
NAME JOSEPHINE FARACI
STREET ADDRESS 8309 GOLDEN BEAR LOOP
CITY-ST-ZIP Port Richey, FL 34668

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

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

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

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:

Carol Ann Bayer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/04

Date

Daytime Phone #