2006 NOT-FOR-PROFIT CORPORATION

Apr 27, 2006 8:00 am Secretary of State ANNUAL REPORT 04-27-2006 90205 045 ****61.25 **DOCUMENT #756332** ORCHID LAKE VILLAGE CIVIC ASSOCIATION, INC. . 400,017 Principal Place of Business Mailing Address 7425 ORCHID LAKE ROAD PO BOX 731 NEW PORT RICHEY, FL 34653 NEW PORT RICHEY, FL 34656-0731 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04142006 Chg-NP CR2E037 (11/05) 4. FEI Number 59-2101365 City & State City & State Applied For Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent John BAYER, CAROL ANN Address (P.O. Box Number 8015 CEDAR RUN DR PORT RICHEY, FL 34668 City 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 obligation registered agen SIGNATURI nd title if apolicable. (NOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE □ Delete TITLE Change Addition GRADY, LAURA John W. Grady NAME NAME 7904 Seasons Lane NPC, Re 34673 7904 SEASONS LN STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 34653 CITY-ST-ZIP VΡ TITLE Delete TITLE 🔽 Change ☐ Addition Greg Rehm 8015 Floral View Way 1801 Richey, Fr 3466 GERVASIO, JOSESP NAME NAME STREET ADDRESS 7338 BOX ELDER DR STREET ADDRESS PORT RICHEY, FL 34668 CITY-ST-ZIP CITY-ST-ZIP TITLE TRES ☐ Delete TITLE ☐ Change Addition àmy Knight PATRICK, RENEE NAME NAME 7030 mistle toe Ct. 7902 ROYAL STEWART DR STREET ADDRESS STREET ADDRESS NPR, PC CITY-ST-ZIP NEW PORT RICHEY, FL 34653 CITY-ST-ZIP 34653 Addition TITLE □ Delete TITLE ☐ Change Barbara Hauser SMITH, WINI B NAME NAME 7415 Bent Oak Dr Port Richey Pe STREET ADDRESS 8121 MOCKERNUT CT STREET ADDRESS CITY-ST-ZIP PORT RICHEY, FL 34668 CITY-ST-ZIP TITLE ☐ Change X Addition TITLE ☐ Delete NAME MAGUIRE, ANTOINETTE NAME Katherine Wiskow 7336 CHINABERRY COURT STREET ADDRESS STREET ADDRESS 9025 Hunt Club Lane CITY-ST-ZIP PORT RICHEY, FL 34668 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 received or trustee employered 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 attachme

IGNING OFFICER OR DIRECTOR

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

SIGNATURE:

BAYER, CAROL ANN

PORT RICHEY, FL 34668

8015 CEDAR RUN

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

810-2102

FILED

Change

☐ Addition