## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## **DOCUMENT# 759463**

FILED Oct 30, 2006 Secretary of State

Entity Name: ORANGE COUNTY HOMEOWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
P O BOX 5: ORLANDO	33657 , FL 3281950	000				
Current Mailing Address:			New Maili	New Mailing Address:		
P O BOX 5: ORLANDO	33657 , FL 3281950	000				
FEI Number:	59-2288209	FEI Number Applied For()	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )		
Name and	Address of (	Current Registered Agent:	Name and	Address of New Registered Agent:		
JUSTICE, S 9117 RIDGI ORLANDO	E PINE TR.	US		OUGLAS ION RIDGE CT 1, FL 32835 US		
The above in the State		submits this statement for the po	urpose of changing it	ts registered office or registered agent, or both,		
SIGNATUR	E: DOUGLA	AS KELLY		10/30/2006		
	Electro	nic Signature of Registered Age	nt	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD ( LARUE, RICHA 1708 SANTA M ORLANDO, FL	IARIA PL.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D ( JUSTICE, SCC 9117 RIDGE P ORLANDO, FL	INE TR.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	SD ( WUNDERLICH 10119 CULPEI ORLANDO, FL	PPER CT.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VD ( KELLY, DOUG 1105 MISSION ORLANDO, FL	RIDGE CT	Title: Name: Address: City-St-Zip:	TD (X) Change ( ) Addition BROWN, ROBERT H 7973 SOUTH PARK PL ORLANDO, FL 32819		
Title: Name: Address: City-St-Zip:	VD ( ETZLER, MAR' PO BOX 72065 ORLANDO, FL	56	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition ETZLER, MARY ANN PO BOX 720656 ORLANDO, FL 32872		
Title: Name: Address: City-St-Zip:	TD (X KELLY, ROBE 10034 CRYSTA ORLANDO, FL	ALLINE CT	Title: Name: Address: City-St-Zip:	()Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT H. BROWN TD 10/30/2006