2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H03117

ORANGE MANAGEMENT CORPORATION

Principal Place of Business 537 E CAUSEWAY BLVD VERO BEACH FL 32963

Mailing Address

P O BOX 4271 VERO BEACH FL 32964

FILED May 15, 2001 8:00 am Secretary of State 05-15-2001 90038 023 ***150.00

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ncipal Place of Business 17/7 20 TH 5 TRUE 2 P. Box 427/				
1717 20 TN 5 TRUE PO BOX 4271 Suite, Apt. #, etc. Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
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City & State BEACH City & State BEACH	n FL	4. FEI Number 59-2410478	Applied For Not Applicable	
Zip 72.6 Country 1 Zip 7.4 /	Country	\$8.7	75 Additional	
32960 Inom River 32964	IRC	9. Certificate of Status Desired Fee F	Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent		
	Name			
CORSORO, GLORIA 597 E CAUSEWAY BLVD 1801 IND. IN RIVER BU VERO BEACH FL 32963 - VERO BEACH IZ 3290	Street Address (Street Address (P.O. Box Number is Not Acceptable)		
	City	FL z	ip Code	
8. The above named entity submits this statement for the purpose of changing its re	egistered office or register	ed agent, or both, in the State of Florida.		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE:	Registered Agent signature required	when reinstating) DATE		
		The state of the s		
Tax filing requirement and elects to do so After MAY 1, 200	FEE IS \$150.00 1 Fee will be \$550.00 e to Department of Stat		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 11	
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NAME CORSORO, GLORIA	NAME CO	esurs CUSEIA OF FROM RIVER BLOOK CS		
STREET ADDRESS 537 E CAUSEWAY BLVD	STREET ADDRESS / 8	0) +MOIM		
CITY-ST-ZIP VERO BEACH FL 32963	-	Pero BEACH FL 32960	·	
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NAME CORSORO, JOSEPH D.	NAME 20	Tropias River Blue &	~8	
STREET ADDRESS 537 E CAUSEWAY BLVD	STREET ADDRESS / 8	37 100.20 31,000 0		
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CITY-ST-ZIP	CITY-ST-ZIP		ĺ	

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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

5612990/00