PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H84164

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May 01,	1999	8:00	am
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05-01-1999 90002 022 ***150.00

1. Corporation	n Name				
ORCHID LAKE INVESTMENTS, INC.				•	
				a (Barari Bura Tehri Bire) kirin dirik birik dirik alah alah alah dirik birik dirik dirik dirik dirik dirik di	1
Principal Place	e of Business	Mailing Address	-	((Bittali Bill) Bitts Biffs	•
6709 RIDGE RO		6709 RIDGE ROAD		-	
STE 200	,,	STE 200			
PORT RICHEY I	FL 34669	PORT RICHEY FL 34668		DO NOT WRITE IN THIS SPACE	 7
US		U\$		3. Date Incorporated or Qualifed 11/06/1985	ł
					-
_ ^	lace of Business .	2s. Mailing Address	٠. د	4. FEI Number Applied For 59-2633849 Not Applicable	╗
	U.S. HW 19	26 P.1 . Bux 210 Suite, Apt. #, etc.	0.4	\$8.75 Additional	~
Suite, Apt.	· .			5. Certificate of Status Desired Fee Regulard	Ì
	NE 201	- City & State		S5 00 May Re	===
City & State		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	11	Trust Fund Contribution Added to Fees	- 1
23 円 人	DAY FL Country	28 ELFERS	Country	8. This corporation owes the current year Intangible	7
24 3469		29 341080-21083	JUSA	Personal Property Tax.	i
24 3469	9. Name and Address of Current		1 4424	10. Name and Address of New Registered Agent	
 	g, Hallie die Aben Cap Di Californi		81 Nargo HN	5 (b) > 5 · a)	- }
NOR	iton, david		JU 1/0	ress (P.Q. Box, Number is Not Acceptable)	\dashv
8709	RIDGE RD #200		82 Street Add	U.S. HW V 19	_}}
1 .			83		_]
j PTR	IICHEY FL 33568		Juit	TE 201	
			84 City	$\mathbf{FL} = \mathbf{FL} = FL$	
t1. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named corp	poration submits this statement for the purpose of changing its registered	7
office or n	egistered agent, or both, in the State of	of Florida, Such change was auth ions of Section 607 0505, Florida	orized by the corporation Statutes.	poration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	
	in latinal will, and except the congar	DIE UI, GEOLOGI COI . DOCOT COM	Out	2^{2}	1
SIGNATURE	Signature, typed or printed name of registered agent	and site if applicable. (NOTE: Re	gistered Agent signature recker		⊣ ଛ
12.	OFFICERS ANI	D DIRECTORS	13. /	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SI 8 L CR2E034 (11/98)
TITLE	PD	☐ DELETE	1.1 TITLE / / .	Change ☐ Addition	" 듯
NAME	HUDSON, JOHN E.		12 NAME	770 1. 6 10 10 10 10 20 241	실
STREET ADDRESS	6709 RIDGE RD #200	,	1.3 STREET ADDRESS	739 4.S. HWY 19 SUITE 201	1 12
слу-5т-28	PT RICHEY FL		1.4 CITY-ST-ZIP	OLIDAY, FL 34641 Change Addition	ᆔᅂ
TITLE	VD	☐ DELETE	2.1 TITLE	☐ Charge ☐ About	"
NAME	MINIERI, CARL		22 NAME		
STREET ADDRESS	29656 US 19 N #100	-			
CITY-ST-ZIP	CUCADMATED EI	•	2.3 STREET ADDRESS		
	CLEARWATER FL		2.4 CITY-ST-ZIP		<u></u>
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NAME	T SILVA, SUSAN	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	739 U-S-HUN 19- SU-17E 201	on
1	T SILVA, SUSAN 6709 RIDGE RD #200	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	739 U-S-HUN 19- SU-17E 201	on
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14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND THE DAME OF SIGNING OFFICER OR DIRECTOR

Description 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in Section 119.07(3)(ii), Florida Statutes. I further certified in Section 119.07(3)(ii), Florida Statutes. I further certified in Section 119.07(3)(iii), Florida Statutes. I further certified in Section 119.07(3)(iii), Florida Statutes.