

**CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08 1997 8:00am
Secretary of State

DOCUMENT # 513421 (8)
1. Corporation Name
ORANGE VENTURES, INC.

Principal Place of Business Mailing Address
1342 East Vine Street Suite No. 207
Kissimmee, FL 34744-3625

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/05/86		3a. Date of Last Report 1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FBI Number 54-1468728		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Corporation Service Company 1201 Hayes Street P. O. Box No. 5022 Tallahassee, FL 32314				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PRESIDENT, Treasurer, Director	1.1 TITLE	☐ Change ☐ Addition		
NAME	J. R. Mullins	1.2 NAME			
STREET ADDRESS	1342 East Vine Street	1.3 STREET ADDRESS			
CITY-ST-ZIP	Kissimmee, FL 34744	1.4 CITY-ST-ZIP			
TITLE	Secretary	2.1 TITLE	☐ Change ☐ Addition		
NAME	J. R. Mullins, II	2.2 NAME			
STREET ADDRESS	2659 W. Front Street	2.3 STREET ADDRESS			
CITY-ST-ZIP	Richlands, VA 24641	2.4 CITY-ST-ZIP			
TITLE		3.1 TITLE	☐ Change ☐ Addition		
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4 CITY-ST-ZIP			
TITLE		4.1 TITLE	☐ Change ☐ Addition		
NAME		4.2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE		5.1 TITLE	☐ Change ☐ Addition		
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE		6.1 TITLE	☐ Change ☐ Addition		
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J. R. Mullins, II *J. R. Mullins, II* 05/01/97 540/963-3637
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone
Secretary