

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 07, 2002 8:00 am
Secretary of State

06-03-2002 91195 017 ****70.00

DOCUMENT # **NOV0000003640** ✓
Entity Name

West Orange Citizen Action Coalition, Inc.

DO NOT WRITE IN THIS SPACE

Principal Place of Business 30 Klondike Street		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Winter Garden		City & State	
Zip 4787	Country U.S.A.	Zip	Country

40856

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3724761		Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		
7. Name and Address of Current Registered Agent		
Name Charlie Mae Wilder		
Street Address (P.O. Box Number is Not Acceptable) 1007 Stucki Terrace		
City Winter Garden		Zip Code FL 34787-4296

**DO NOT WRITE
IN THIS SPACE**

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.

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

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

**Make Check Payable to
Department of State**

OFFICERS AND DIRECTORS			
NAME STREET ADDRESS CITY-ST-ZIP	Henry Lee Dudley 1015 Mildred Dixon Way Winter Garden, FL 34787	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	Darlene Henry 1462 Kenny Court Winter Garden, FL 34787	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	Marvelous Rogers 1401 Kenny Court Winter Garden, FL 34787	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP	Arthur Mack 1351 W. Bay Street Winter Garden, FL 34787	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	Charlie Mae Wilder 1007 Stucki Terrace Winter Garden, FL 34787-4296	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

CR2E037B (12/01)