

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000006699

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** ORCHID LAKE VILLAGE UNIT TEN HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8316 SUMMERSIDE LANE  
PORT RICHEY, FL 34668 US

**New Principal Place of Business:**

7220 DOGLEG CT  
PORT RICHEY, FL 34668 US

**Current Mailing Address:**

P.O. BOX 1218  
PORT RICHEY, FL 34668 US

**New Mailing Address:**

**FEI Number:** 59-2889885

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURKE, EDWARD  
8316 SUMMERSIDE LANE  
PORT RICHEY, FL 34668 US

**Name and Address of New Registered Agent:**

VELASQUEZ, CHRISTINA  
7220 DOGLEG CT  
PORT RICHEY, FL 34668 US

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: CHRISTINA VELASQUEZ

01/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TRES  
Name: WALTERS, ADELAIDE B  
Address: 7214 DOGLEG CT  
City-St-Zip: PORT RICHEY, FL 34668

Title: SEC  
Name: BRUEY, FLORENCE  
Address: 7457 MULLIGAN ST  
City-St-Zip: PORT RICHEY, FL 34668

Title: PRES  
Name: VELASQUEZ, CHRISTINA  
Address: 7220 DOGLEG CT  
City-St-Zip: PORT RICHEY, FL 34668

I hereby 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 all other like empowered.

SIGNATURE: ADELAIDE B WALTERS

TREA

01/05/2011

Electronic Signature of Signing Officer or Director

Date