2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2007
Secretary of State

DOCUMENT# N02000003852

Entity Name: ORANGEWOOD COURT OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2835 STATE ROAD 60 E.
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1582
BARTOW, FL 338312289

New Mailing Address:

FEI Number: 52-2406940 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

O'TOOLE, NEAL
310 EAST MAIN STREET
BARTOW, FL 33801 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCMICKEN, SEAN
Address: 2835 STATE ROAD 60 E.
City-St-Zip: BARTOW, FL 33830

Title: VD ( ) Delete
Name: HEIDEL, MATT
Address: 2835 STATE ROAD 60 E.
City-St-Zip: BARTOW, FL 33830

Title: SD (X) Delete
Name: HEIDEL, JAN
Address: 2835 STATE ROAD 60 E.
City-St-Zip: BARTOW, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ORTH, JAMIE
Address: 1865 ORANGEWOOD CT
City-St-Zip: BARTOW, FL 33830

Title: SC (X) Change ( ) Addition
Name: MCMICKEN, SEAN
Address: 1890 ORANGEWOOD CT.
City-St-Zip: BARTOW, FL 33830

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SEAN MCMICKEN SC 05/09/2007

Electronic Signature of Signing Officer or Director — Date