## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000000325

Entity Name: ORANGE ACRES UTILITY, INC.

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5130 ABC ROAD

LAKE WALES, FL 33859

Current Mailing Address: New Mailing Address:

5130 ABC ROAD 5130 ABC ROAD

LAKE WALES, FL 33859 LOT 134

LAKE WALES, FL 33859

FEI Number: 20-8743482 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BUTLER, MARK E MEB REAL ESTATE MANAGEMENT, INC.

5609 26TH ST 5609 26TH ST

BRADENTON, FL 34207 US BRADENTON, FL 34207 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: MARK E. BUTLER 02/05/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WEBB, BRANDON
 Name:

 Address:
 5000 CLAYTON RD
 Address:

 City-St-Zip:
 MARYVILLE, TN 37804
 City-St-Zip:

Title: VPD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 RUTHERFORD, MICHAEL
 Name:

 Address:
 5000 CLAYTON RD
 Address:

 City-St-Zip:
 MARYVILLE, TN 37804
 City-St-Zip:

Title: ST () Delete Title: VPST (X) Change () Addition

 Name:
 HUGGART, BRUCE
 Name:
 HUGGART, BRUCE

 Address:
 5000 CLAYTON RD
 Address:
 5000 CLAYTON RD

 City-St-Zip:
 MARYVILLE, TN 37804
 City-St-Zip:
 MARYVILLE, TN 37804

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

Name:STROTHEEIDE, LARRYName:STROTHEIDE, LARRYAddress:5130 ABC RD LOT 66Address:5130 ABC RD LOT 66City-St-Zip:LAKE WALES, FL 33859City-St-Zip:LAKE WALES, FL 33859

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: BRANDON WEBB P 02/05/2009