

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N13337**

1. Entity Name

ORANGE PARK HOMES, INC.**FILED**
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90131 014 ****61.25

Principal Place of Business	Mailing Address
C/O KNIGHTS OF COLUMBUS COUNCIL NO. 7399 P.O. BOX 1455 ORANGE PARK FL 32067-1455	C/O KNIGHTS OF COLUMBUS COUNCIL NO. 7399 P.O. BOX 1455 ORANGE PARK FL 32067-1455

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	59-2804027	Applied For
		Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required**6. Name and Address of Current Registered Agent****O'LAUGHLIN, FRANCIS M.**
750 WINFRED DRIVE, SOUTH
ORANGE PARK FL 32073**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State**10. OFFICERS AND DIRECTORS**

TITLE	VD	<input type="checkbox"/> Delete
NAME	SKULSKY, JAMES W	
STREET ADDRESS	1682 DOGWOOD CIR	
CITY-ST-ZIP	MIDDLEBURG FL 32068	
TITLE	PD	<input type="checkbox"/> Delete
NAME	HEAD, GEORGE R.	
STREET ADDRESS	2343 MARCEL DRIVE	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	TD	<input type="checkbox"/> Delete
NAME	O'LAUGHLIN, FRANCIS M.,	
STREET ADDRESS	750 WINFRED DRIVE, SOUTH	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	PALMER, JESSIE E	
STREET ADDRESS	1614 BELLAIR BLVD	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GROSS, CHARLES V.	
STREET ADDRESS	3239 DOCTOR'S LAKE DR.	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HALL, DENNIS	
STREET ADDRESS	5472 HARDEN AVE	
CITY-ST-ZIP	ORANGE PARK FL 32065	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Francis M. O'Laughlin* **FRANCIS M. O'LAUGHLIN (TD) 1-9-02 (904)264-3273**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)