2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2007
Secretary of State

DOCUMENT# N20252

Entity Name: ORCHID SPRINGS ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

100 ISLAND WAY
WINTER HAVEN, FL 33884 US

New Principal Place of Business:

Current Mailing Address:

100 ISLAND WAY
WINTER HAVEN, FL 33884 US

New Mailing Address:

FEI Number: 59-2889701 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWIS, URSULA
100 ISLAND WAY
WINTER HAVEN, FL 33884 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: TT ( ) Delete
Name: LEWIS, URSULA
Address: 100 ISLAND WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: DPP ( ) Delete
Name: BENTLEY, ROBERT
Address: 1200 ISLAND WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP ( ) Delete
Name: HILL, GERALD
Address: 150 ISLAND WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: PT ( ) Delete
Name: OLDT, THOMAS
Address: 300 ISLAND WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: S ( ) Delete
Name: HOLLADAY, CANDACE
Address: 1400 ISLAND WAY
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: URSULA LEWIS TT 03/09/2007

Electronic Signature of Signing Officer or Director — Date