

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20252

**FILED**  
**Mar 28, 2008**  
**Secretary of State**

**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:**

1350 ISLAND WAY  
WINTER HAVEN, FL 33884 US

**Current Mailing Address:**

100 ISLAND WAY  
WINTER HAVEN, FL 33884 US

**New Mailing Address:**

1350 ISLAND WAY  
WINTER HAVEN, FL 33884 US

**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:**

OSEPOA, INC.  
1350 ISLAND WAY  
WINTER HAVEN, FL 33884 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: URSULA LEWIS

03/28/2008

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: TT (X) Change ( ) Addition  
Name: SOWARDS, STEPHEN  
Address: 950 ISLAND WAY  
City-St-Zip: WINTER HAVEN, FL 33884

Title: DPP (X) Change ( ) Addition  
Name: LEWIS, URSULA  
Address: 100 ISLAND WAY  
City-St-Zip: WINTER HAVEN, FL 33884

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

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

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: URSULA LEWIS

DPP

03/28/2008

Electronic Signature of Signing Officer or Director

Date