FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

N35269

(2)

PROPERTY OWNERS OF ORANGE CREEK SUBDIVISION, INC

***************************************					-		
Principal Place of Business Mailing Address						amis mimit mimis mines danes	ALOM MIGHT 1461
C/O RICHARD LUNDBERG C/O RICHARD LUNDBERG							
11109 ORANGEWOOD DR.		11109 ORANGEWOOD DR.					
BONITA SPRINGS FL 33923		BONITA SPRINGS FL 34135-5720		3. Date Incorporated or Qualified	3a Date of Last F	Renort	
US		US		3. Date Incorporated or Qualified 11/17/1989	3a. Date of Last F 07/15/1	996	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number 65-0167195	 	pplied For of Applicable
Suile, Apt. #, etc		Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		B. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country		This corporation has liability for in		
		29 30		Florida Statutes Yes No			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	pistered Agent	
			B1	Name			
LUNDBERG, RICHARD			B2	82 Street Address (P.O. Box Number is Not Acceptable)			
	Orangewood Dr						
BONITA	SPRINGS FL 33923		63				
			84	City	**************************************	FL 85 Zip	Code C
11. Pursuant	to the provisions of Sections 617,0502	and 617.1508, Florida Statute	es, the above-r	named corpo	pration submits this statement for the p		ts registered
office or re	egistered agent, or both in the State of	#Florida. Such change was a	uthorized by the	ne corporation	pration submits this statement for the pon's board of directors. I hereby accept	t the appointment as	registered
	100011 1001	20,000,000	mya siaidios.	2 / 100	dlesin	5/21/97	
SIGNATURE	Signaturu, typicu or printed name plaegistered yaen	t ard title if applicable (NOT)	Registered Agent	signature require	d Milan refreietige)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12
TITLE	DP	☐ DELETE	1.1 TITLE			Change	Addition
NAME	WALKER, ROBERT		1.2 NAME				
STREET ADDRESS	27501 MATHERSON AVE.		1.3 STREET AL	ORESS			
CITY-ST-ZIP	BONITA SPRINGS FL		1.4 CITY - ST - 3	ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE	DVP	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	NELSON, JAMES		2.2 NAME				
STREET ADDRESS	11131 TANGELO TERRACE		2.3 STREET AL	ORESS			
CITY-ST-ZIP	BONITA SPRINGS FL		2.4 CITY-ST-	ZIP			
TITLE	DS	☐ DELETE	3.1 TITLE			☐ Change	Addition Addition
NAME	WALKER, DEBRA		3.2 NAME				
STREET ADDRESS	27501 MATTERSON AVE.		3.3 STREET AC				
CITY-ST-ZIP	BONITA SPRINGS FL	T Access	3.4. CITY-ST-	ZIP		F-1 &	
TITLE	THINDDEDG DICHADD	DELETE	4.1 TITLE			Change	Addition
NAME	LUNDBERG, RICHARD		4.2 NAME				
STREET ADDRESS	11109 ORANGEWOOD DR BONITA SPRINGS FL		4.3 STREET AC				
City-SI-ZiP	BUNITA SPAINGS PL	DELETE	4.4 CITY - ST - 1	ZIP		Change	Addition
TITLE		F= DETELE	5.1 TITLE			☐ Change	Addition Addition
NAME STORES ADDRESS			5.2 NAME		•		•
STREET ADDRESS			5.3 STREET AC				
CITY · ST - ZIP		☐ DELETE	5.4 CITY - ST - 1	ZIP		/ Theres	a designation of
TITLE		L DELCTE	6.1 TITLE			Change	Addition
NAME STREET ADDRESS			6.2 NAME				
STREET ADDRESS			6.3 STREET AC				
CITY - ST - ZIP			6.4 CITY-ST-	ZIP			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE.

ORE AND TYPED OF PRINTED HALL OF SIGNING OFFICER OR DIRECTOR

5/31/97

(941)643-4747 Davigne Phone # 0080398

FILED

Jun 02 1997 8:00am

Secretary of State