FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000000952 (2)

ASSOCIATION OF WEST ORANGE LANDOWNERS, INC.

Principal Place of Business Mailing Address					T I GRUSHON SIN NATAO NINTA ORSIA ORNIA ORISA SANIA ORISA ORISA ORISA ORISA ORISA ORISA ORISA ORISA ORISA DE CESSO NINDA ORISA DE CESSO	11881		
105 WEST PL	ANT STREET	P.O. BOX 770606	P.O. BOX 770606			3. Date Incorporated or Qualified		
WINTER GARD		WINTER GARDEN FL 34777				· · · · · · · · · · · · · · · · · · ·		
						02/15/1993 4. FEI Number Applied	For	
2 Principal F	Place of Business	2a, Mailing Addre	99			00 0101000		
21	1000 01 00011000	26				5. Certificate of Status Desired 58.75 Addition Fee Required		
Suite, Apt.	#, etc.	Suite, Apt. #, ı	etc.			6. Election Campaign Financing \$5.00 May B	e	
22		27				Trust Fund Contribution		
City & Star	te	City & State	City & State			7. Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip	Co	untry	,	8. This corporation owes or has paid the current year Intangible	e	
24	25 29 30		30]		Personal Property Tax due June 30. 🔲 Yes 🔲 No		
	9. Name and Address of Curre	nt Registered Agent		\Box		10. Name and Address of New Registered Agent		
				81	Name			
	I, LESTER		82 Street Ad		Street Add	dress (P.O. Box Number is Not Acceptable)		
105 WE			83					
MIMIE	R GARDEN FL 34787			\perp				
				84	City	FI 85 Zip Code		
11. Pursuant	to the provisions of Sections 617.05	02 and 617,1508, Florida	a Statutes, the	above	e-named cor	rporation submits this statement for the purpose of changing its regis	stered	
office or	registered agent, or both, in the State	e of Florida, Such chang	e was authoriz	ed by	the corpora	rporation submits this statement for the purpose of changing its registation's board of directors. I hereby accept the appointment as registration	ered	
	an tanıllar war, and accept the only	galicins of, decilori o 17,0	oob, i lollaa ol	atotet	J.			
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Rogiste	ed Age	ent signature requ	uired when reinstating) DATE		
12.		ID DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2	
TITLE	D	DELETÉ		1,1 TITLE		☐ Change ☐ A	Addition	
NAME	AUSTIN, LESTER		1.2	1.2 NAME				
STREET ADDRESS				1.3 STREET ADDRESS				
CITY-ST-ZIP	WINTER GARDEN FL 34787			CITY-S	ST-ZIP			
TITLE	PD DELETE		ETE 2.1	2.1 TITLE		☐ Change ☐ A	Addition	
NAME	KARR, JIM		2.2	2.2 NAME				
STREET ADORESS	*			STREET	ADDRESS			
CîTY-ST-ZIP	P ORLANDO FL 32801			2. 4 CITY-ST-ZIP				
TITLE	VD DELETE		ETE 3.1	3.1 TITLE		, Change	Addition	
NAME	PHILLIPS, DON		3.2	3.2 NAME				
STREET ADDRESS	219 FLORAL		3.3	3.3 STREET ADDRESS				
CITY-ST-ZIP	OCOEE FL 34761			3.4. CITY-ST-ZIP				
TITLE	SD DELETE		ETE 4,1	4.1 TITLE		Change	Addition	
NAME	JUKE, RANDY		4. 2	4, 2 NAME				
STREET ADDRESS	71 E. CHURCH ST.		4.3	STREET	ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32801		4.4	CITY-S	ST-ZIP			
TITLE	TD DELETE		ETE 5.1	5.1 TITLE		☐ Change ☐ A	Addition	
NAME	AMON, JACK		5.2	NAME				
STREET ADDRESS	219 W. OAKLAND AVE.		5.3	STREET	ADDRESS			
CITY-ST-ZIP	OAKLAND FL 34760		5.4	cmy-s	ST-ZIP			
TITLE	D	DEL	ETE 6.1	TITLE		Change L	Addition	
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14. 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 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 on 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.

6.3 STREET ADDRESS

GNATURE DA ROLLING URE BROOKERDAM

950 W. STORY RD.

STREET ADORESS

1/16/98

FILED

Jan 29 1998 8:00am

Secretary of State

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