

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N94000003614

1. Entity Name
ORANGE HARBOR PARK HOMEOWNERS
ASSOCIATION, INC.



Principal Place of Business
5749 PALM BEACH BLVD
FT MYERS, FL 33905

Mailing Address
ROBERT ZEILINGER
96 SUN CIRCLE
FT MYERS, FL 33905



01162007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0496211

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOFFMAN, WILLIAM
5749 PALM BEACH BLVD
FORT MYERS, FL 33905

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HIER, LESLIE E
STREET ADDRESS 24 CHANNEL LANE
CITY-ST-ZIP FORT MYERS, FL 33905

TITLE VP
NAME GRIMES, VIRGINIA
STREET ADDRESS 159 SUN CIRCLE
CITY-ST-ZIP FORT MYERS, FL 33905

TITLE D
NAME MULLER, SUSIE
STREET ADDRESS 200 SUN CIRCLE
CITY-ST-ZIP FORT MYERS, FL 33905

TITLE D
NAME COPPER, WALTER
STREET ADDRESS 266 SUN CIRCLE
CITY-ST-ZIP FORT MYERS, FL 33905

TITLE T
NAME ZEILINGER, ROBERT
STREET ADDRESS 96 SUN CIRCLE
CITY-ST-ZIP FORT MYERS, FL 33905

TITLE S
NAME DUDGEON, ELIZABETH
STREET ADDRESS 314 SHORELAND DRIVE
CITY-ST-ZIP FORT MYERS, FL 33905

U000000593168
01/22/07-80021-003 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert G. Zeilinger ROBERT G. ZEILINGER

1/17/07

Date

239-690-0378

Daytime Phone #