2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED May 24, 2000 8:00 am Secretary of State DOCUMENT # N95000004321 1. Entity Name 05-24-2000 90139 023 ****61.25 WEST ORANGE PEOPLE IN PARTNERSHIP, INC. Mailing Address Principal Place of Business 830 KLONDIKE ST. 830 KLONDIKE ST. WINTER GARDEN FL 34787-3225 WINTER GARDEN FL 34787 3. Mailing Address St. ONDIKE St. 2. Principal Place of Business DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State TER GARDEN, 59-3350461 WINTER GARI Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NICHOLSON, LYNN 830 KLONDIKE ST. WINTER GARDEN FL 34787 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. Delete Change ☐ Addition TITLE TITLE HOLT, CARLA 1052 N. Circle Court Winter Garden, Fla. 34787 VD NICHOLSON, LYNN NAME NAME STREET ADDRESS STREET ADDRESS 12548 LAKE RIDGE CIRCLE CITY-ST-ZIP CITY-ST-ZIP CLERMONT FL 34711 Change ☑ Delete ☐ Addition ٧D TITLE TITLE Nicholson, Lynn 12548 Lake Ridge circle Clermont, fl. 34711 EARLE, CARLENE NAME NAME STREET ADDRESS STREET ADDRESS 1020 CHASE DR CITY-ST-7IP CITY-ST-ZIP_ WINTER GARDEN FL 34787 **Addition** 🗷 Delete TITLE Jones, Vanessa NAME Baker, Kosemary STREET ADDRESS 5656 GRAND CANYON DR STREET ADDRESS P.O. BOX 772 023 Winter Garden, Fl. 34787 City-ST-7IP CITY-ST-ZIP ORLANDO FL 32810 ☐ Addition ☐ Delete TITLE MCFARLAND, PATRICIA 12548 LAKE RIDGE CIRCLE MCFARLAND, PATRICIA NAME NAME STREET ADDRESS 12548 LAKE RIDGE CIRCLE STREET ADDRESS CITY-ST-ZIP CLERMONT, FI 34711 CITY-ST-ZIP CLERMONT FL 34711 ☐ Addition ☐ Delete TITLE TITI F DIXON, G! ADYS 1160 EAST BAX Street Winter Garden, Fl 34787 DIXON, GLADYS NAME NAME STREET ADDRESS 1160 EAST BAY STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER GARDEN FL Addition AT ☐ Delete TITLE TITLE HOLT, CARLA NAME NAME STREET ADDRESS 1052 N. CIRCLE COURT STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP Winter Garden FL 34787 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.