

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90143 001 ****70.00

DOCUMENT # N98000000303

1. Entity Name

ORANGEWOOD MOBILE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

**14 ORANGE STREET
DELAND FL 32724**

Mailing Address

**14 ORANGE STREET
DELAND FL 32724**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2094771**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MERRIAM, JUDY
14 ORANGE STREET
DELAND FL 32724**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
WELLS, RICHARD
8 ORANGE ST
DELAND FL 32724** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
WELLS, RICHARD
8 ORANGE ST
DELAND, FL 32724** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
GRAHAM, RICHARD
8 VALENCIA CT
DELAND FL 32724** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
HELEN MONROE
8 ORANGE ST
DELAND, FL 32724** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
MERRIAM, JUDY
14 ORANGE ST
DELAND FL 32724** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
JUDY MERRIAM
14 ORANGE ST
DELAND, FL 32724** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CARLISLE, ROBERT
7 ORANGE STREET
DELAND FL 32724** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**RD
FORREST DICKERSON
24 ORANGE ST
DELAND, FL 32724** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
TONY COLOART
3 ORANGE ST
DELAND, FL 32724** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
IRENE
3 ORANGE ST
DELAND** ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617, indicated on this report or supplemental report is true and accurate and that my signature shall have the same effect as that of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judy Merriam*

**TITLE - D
NAME - CALVIN CLARK
STREET ADDRESS - 8 Temple CT
CITY-ST-ZIP - Deland, FL 32724**

CR2E037 (10/02)