## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000035594

1448 EAST BEXLEY PARK DR.

DELRAY BEACH, FL 33445

Address: City-St-Zip:

FILED Jan 20, 2009 Secretary of State

**Entity Name:** ORANGE FINANCIAL CORP. **Current Principal Place of Business: New Principal Place of Business:** 1448 EAST BEXLEY PARK DR. DELRAY BEACH, FL 33445 **Current Mailing Address: New Mailing Address:** 1448 EAST BEXLEY PARK DR. DELRAY BEACH, FL 33445 FEI Number: 22-3922486 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PAUL, ALEXANDER B PRES SHERRILL, CLEVE D V 4177 NW 28TH AVE 240 AVIATION DR NORTH BOCA RATON, FL 33434 US 200 NAPLES, FL 34104 US 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: C. DAVID SHERRILL 01/20/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition PAUL, ALEXANDER B Name: Name: 1448 EAST BEXLEY PARK DR. Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: VD Title: () Delete () Change () Addition Name: PAUL, DONNA J Name: 1448 EAST BEXLEY PARK DR. Address: Address: DELRAY BEACH, FL 33445 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition SHERRILL, CLEVE DAVID Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ALEXANDER B PAUL PD 01/20/2009