FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 PM 11:52

DOCUMENT # **P93000073315 (2)**

1. Corporation Name
ORANGEWOOD REALTY, INC.

Principal Place of Business	Mailing Address
505 US 27 NORTH AVON PARK FL 33825	505 US 27 NORTH AVON PARK FL 33825

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/18/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 2550 N. Orangewood St.	26 2550 N. Orangewood St.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Avon Park, Fl.	28 City & State: Avon Park, Fl.
24 Zip: 33825 / 25 Country: Highlands	29 Zip: 33825 / 30 Country: Highlands

4. FEI Number: 65-0449236 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ROGERS, LARRY 2550 N. ORANGEWOOD ST. AVON PARK FL 33825	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 2550 N. Orangewood St. 83 84 City: Avon Park FL 85 Zip Code: 33825

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	P	☒ Change ☐ Addition
NAME	ROGERS, LARRY	12 NAME	Larry Rogers	
STREET ADDRESS	2485 LAKE LILLIAN DR.	13 STREET ADDRESS	2485 Lake Lillian Dr.	
CITY ST ZIP	AVON PARK FL 33825	14 CITY ST ZIP	Avon Park, Fl. 33825	
TITLE	D	21 TITLE	V	☒ Change ☐ Addition
NAME	WOLCOTT, ALVIN	22 NAME	Alvin Wolcott	
STREET ADDRESS	2435 N. AZALEA DR.	23 STREET ADDRESS	2435 N. Azalea Dr.	
CITY ST ZIP	AVON PARK FL 33825	24 CITY ST ZIP	Avon Park, Fl. 33825	
TITLE		31 TITLE	S T	☐ Change ☒ Addition
NAME		32 NAME	Judy Wolcott	
STREET ADDRESS		33 STREET ADDRESS	2435 N. Azalea Dr.	
CITY ST ZIP		34 CITY ST ZIP	Avon Park, Fl. 33825	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Larry Rogers Larry Rogers 2-5-95 813 452 5554
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0318100 CP