

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000013021 (8)

1. Corporation Name

ORANGEWOOD ENERGY CONSULTANTS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -3 PM 3:49

Principal Place of Business

2552 N ORANGEWOOD ST
AVON PARK FL 33825

Mailing Address

2552 N ORANGEWOOD ST
AVON PARK FL 33825

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/14/1994

3a. Date of Last Report

4. FEI Number

65-0479015

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

HAYES, RICHARD A
2552 N ORANGEWOOD ST
AVON PARK FL 33825

10. Name and Address of New Registered Agent

81 Name

Alvin F. Wolcott

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

2552 N. Orangewood St.

83

84 City

Avon Park

FL

85

33825

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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

Alvin F. Wolcott

Alvin F. Wolcott, President

2-25-95

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

D

NAME

WOLCOTT, ALVIN F

STREET ADDRESS

2435 AZALEA DR

CITY - ST - ZIP

AVON PARK FL 33825

TITLE

D

NAME

HAYES, RICHARD A

STREET ADDRESS

2080 GASTOR RD

CITY - ST - ZIP

AVON PARK FL 33825

TITLE

D

NAME

BRODUE, EMILE A

STREET ADDRESS

2515 N ORANGEWOOD ST

CITY - ST - ZIP

AVON PARK FL 33825

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

S T

☒ Change ☐ Addition

2.2 NAME

Judy A. Wolcott

2.3 STREET ADDRESS

2552 N. Orangewood St.

2.4 CITY - ST - ZIP

Avon Park, FL 33825

3.1 TITLE

V

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 110.07(3)(b), 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 of this report, and that I am changing, or am an attachment with an address.

SIGNATURE:

Alvin F. Wolcott

Alvin F. Wolcott, President

2-25-95

(Signature and typed or printed name of registered officer or director)

(Date)

(Signature and typed or printed name of registered agent)