

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90177 018 ***158.75

DOCUMENT # **P95000060829 ✓**

1. Entity Name

ORLANDO WORLD DEVELOPMENT

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

SAME AS MAILING ADDRESS

3. Mailing Address

Suite, Apt. #, etc.

9003 PINNACLE CIRCLE

City & State

City & State

WINDERMERE FL

Zip

Country

Zip

Country

34786

ORANGE

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3335720

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

RODGER L. ANDERSON

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

9003 PINNACLE CIRCLE

WINDERMERE FL

City

FL

Zip Code

34786

**DO NOT WRITE
IN THIS SPACE**

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

Rodger L. Anderson
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-4-02

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Rodger ANDERSON, President
9003 PINNACLE CIRCLE
WINDERMERE FL 34786

TITLE
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13. I hereby certify that the information supplied with this filing 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rodger L. Anderson President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-4-02
407 298-6274

CR2E034B (12/01)