

2004 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2004 8:00 am x1
Secretary of State

02-06-2004 90021 038 ***150.00

DOCUMENT # P96000004977
1. Entity Name
ORANGEWOOD INCORPORATED

DO NOT WRITE IN THIS SPACE

94011113

2. Principal Place of Business 505 US 27 N Suite, Apt. #, etc.		3. Mailing Address 505 US 27 N Suite, Apt. #, etc.	
City & State AVON PARK, FL		City & State AVON PARK	
Zip 33825	Country HIGHLANDS	Zip 33825	Country HIGHLANDS
4. FEI Number 59-3360367		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired: <input type="checkbox"/>		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name HAYES, RICHARD A.	
Street Address (P.O. Box Number is Not Acceptable) 2080 GASTOR ROAD	
City AVON PARK	FL Zip Code 33825

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

9. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS				11.			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DP HAYES, RICHARD A 2080 GASTOR RD AVON PARK, FL. 33825		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DVST MAHOTA, HERBERT C 3010 MARYLAND DRIVE AVON PARL, FL. 33825		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  HERBERT C MAHOTA, V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-3-04 863-453-2263
Daytime Phone #.