



FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 17 1997 8:00am  
Secretary of State



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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997

DOCUMENT # P96000019428 (7)

1 Corporation Name  
ORANGE LAKE PROPERTIES, INC.



Principal Place of Business  
C/O CALVIN E. HAYDEN  
200 W. FORSYTH ST., STE. 1330  
JACKSONVILLE FL 32202

Mailing Address  
C/O CALVIN E. HAYDEN  
200 W. FORSYTH ST., STE. 1330  
JACKSONVILLE FL 32202-4314

3. Date Incorporated or Qualified  
02/28/1996

3a. Date of Last Report

2 Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-3366423	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28		
Zip	Country	29	30
24	25	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

HAYDEN, CALVIN E  
200 W. FORSYTH ST.  
SUITE 1330  
JACKSONVILLE FL 32202

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL
85 Zip Code

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

Signature, typed or printed name of registered agent and firm, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0/Secretary/Treasurer	1.1 TITLE	President
NAME	HAYDEN, CALVIN E	1.2 NAME	George T. Miller, As Trustee
S. REET ADDRESS	200 W. FORSYTH ST., STE. 1330	1.3 STREET ADDRESS	200 W. Forsyth Street, Suite 1330
CITY - ST - ZIP	JACKSONVILLE FL 32202	1.4 CITY - ST - ZIP	Jacksonville, Florida 32202
TITLE		2.1 TITLE	Vice President
NAME		2.2 NAME	B.S. Reid, As Trustee
S. REET ADDRESS		2.3 STREET ADDRESS	200 W. Forsyth Street, Suite 1330
CITY - ST - ZIP		2.4 CITY - ST - ZIP	Jacksonville, Florida 32202
TITLE		3.1 TITLE	
NAME		3.2 NAME	
S. REET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
S. REET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
S. REET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
S. REET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 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

Bank Dep \$ 165.00

1/21/97 901-8551330

CR2E034 (9/96)