

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

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90084 025 ***150.00

DOCUMENT # V03563	
1. Entity Name	
ORANGEWOOD DEVELOPMENT INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1105 W. CIRCLE ST		3. Mailing Address 1105 W CIRCLE ST	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State AVON PARK, FL		City & State AVON PARK, FL	
Zip 33825	Country US	Zip 33825	Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3132934		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**

7. Name and Address of Current Registered Agent	
Name HAYES, RICHARD A	
Street Address (P.O. Box Number is Not Acceptable) 902 DEER LAKE RD	
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

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAYES, RICHARD A 902 DEER LAKE RD AVON PARK, FL 33825
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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:

 RICHARD A HAYES, PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

863-452-6400
Daytime Phone #