

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 30 AM 11:24

DOCUMENT # V07252 (2)

1. Corporation Name

ORLANDO BUILDING ASSOCIATES, INC.

Principal Place of Business

1354 BENNETT ROAD
SPACE D
LONGWOOD FL 32750
US

Mailing Address

2704 SHAD LANE
GENEVA FL 32732

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/16/1992

3a. Date of Last Report

02/10/1994

4. FEI Number

59-3101800

Applied For

Not Applicable

2. Principal Place of Business

21

2a. Mailing Address

26 1352 Bennett Drive

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27 Suite D

City & State

23

City & State

28 Longwood, Florida

Zip

24

Country

29 32750

Country

30 USA

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be

Added to Fees

9. 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

WREN, JOHN E.
2704 SHAD LANE
GENEVA FL 32732-4997

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 title if applicable).

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	WREN, JOHN E.
STREET ADDRESS	2704 SHAD LANE
CITY- ST- ZIP	GENEVA FL
TITLE	ST
NAME	WREN, BRENDA W.
STREET ADDRESS	2704 SHAD LANE
CITY- ST- ZIP	GENEVA FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	Wren, John E.	
1.3 STREET ADDRESS	611 Sunrise Avenue	
1.4 CITY- ST- ZIP	Winter Springs, FL 32708	
2.1 TITLE	ST	☒ Change ☐ Addition
2.2 NAME	Wren, Brenda W.	
2.3 STREET ADDRESS	611 Sunrise Avenue	
2.4 CITY- ST- ZIP	Winter Springs, FL 32708	
3.1 TITLE	V	☐ Change ☒ Addition
3.2 NAME	Kapalo, Robert W.	
3.3 STREET ADDRESS	2536 Tree Ridge Lane	
3.4 CITY- ST- ZIP	Orlando, FL 32817	
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 119.07(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 resolver 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

John E. Wren

John E. Wren, President

1/24/95

407-830-6288

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

Date

Telephone Number