

**2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000002303

**Entity Name:** THE ORCHARD FOUNDATION INC.

**Current Principal Place of Business:**

8595 EXPLORER DRIVE  
COLORADO SPRINGS, CO 80920

**Current Mailing Address:**

8595 EXPLORER DRIVE  
COLORADO SPRINGS, CO 80920

**FEI Number: 84-1466105**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

STEPHENSON, TIMOTHY A  
11968 AVALON PRESERVE BLVD.  
FT. MYERS, FL 33908 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name CUMMINGS, TIMOTHY W  
Address 8595 EXPLORER DRIVE  
City-State-Zip: COLORADO SPRINGS CO 80920

Title C  
Name PRESHER, DAVID F  
Address 870 MARINA DEL RAY LANE  
UNIT 1  
City-State-Zip: WEST PALM BEACH FL 33401

Title D  
Name COOK, NANCY D  
Address 6240 GALL BLVD  
City-State-Zip: ZEPHYRHILLS FL 33542

Title D  
Name ATKINSON, HOWARD L  
Address 15551 W. EARLL DRIVE  
City-State-Zip: GOODYEAR AZ 85395

Title D  
Name GOOD, JAMES A  
Address 7895 STONEHOUSE COURT  
City-State-Zip: CENTERVILLE OH 45459

Title D  
Name GOULD, LINDA F  
Address 1665 BRIARGATE BLVD., SUITE 101  
City-State-Zip: COLORADO SPRINGS CO 80920

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: TIMOTHY W. CUMMINGS**

**VP**

**04/12/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date