## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

701688

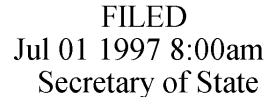
(4)

## CENTRAL FLORIDA ORCHID SOCIETY INC

Principal Place of Business	
POST OFFICE BOX 3105	

Mailing Address

POST OFFICE BOX 3105



ONDANIOO FL 3	2002-0100	OUTWINDO LE SEGRESTOS							
					3. Date Incorporated or Qualified 11/18/1960	3a. Date of Last Repo- 05/01/1996	rl		
·····	iace of Business	2a. Mailing Address			4. FEI Number	Applie	d For		
26					59 <del>-6</del> 151072	Not Ar	oplicable		
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 Add			
City & State		City & State				Fee Requir			
23 City & State	<del>5</del>	<b>├</b> ─ <b>1</b>			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May			
Zip	Country	Zip	Cour	ntrv		7,0000			
24	25	29	30	,	8. This corporation has liability for i	ntangible tax under s. 195 Yes 💢 No	9.032,		
	9. Name and Address of Curren	t Registered Agent	1001		10. Name and Address of New Re				
				81 Name					
MCGONIGAL, WAYNE T.				82 Street	et Address (P.O. Box Number is Not Acceptable)				
	IASON DIXON CIRCLE			Sileer.	aress (P.O. Box Number is Not Acceptable)				
	O FL 32821			B3					
			-	B4 City		85 Zip Code	e		
44 Diversions	to the equiples of Pastions 617.0500	and C17 1500 Florida Chalut	45		the state of the s	FL 83 Zip Cook	<del></del>		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.									
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE WAYN T. MCGONIGAL PRESIDENT, WAYNE T. MCGONIGAL 6/25/97									
SIGNATURE _	Signature, typed or printed name of registered ager				YNE T. McGONIGAL required when reinslating)	<u>Φ/25/1</u> DATÉ			
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN	V 12		
TITLE	P	☐ DELETE	1.170	.E		☐ Change ☐	Addition		
NAME	MCGONIGAL, WAYNE		1.2 NA	ИE			1		
STREET ADDRESS	10173 MASON DIXIE CIRCLE		1.3 STF	EET ADDRESS					
CITY-ST-ZIP	ORLANDO FL		_	Y-ST-ZIP		***	<b></b> ;		
TITLE	V	<b>⋈</b> delete	2.1 111		V	☐ Change	Addition		
NAME	SARLES, DON		2.2 NA	-	CAPITANO, ANTHONY				
STREET ADDRESS	875 LOOKOUT LANE			EET ADDRESS	851 EAST VOTAW RP.				
CITY-ST-ZIP TITLE	OSTEEN FL	DELETE	_	Y-ST-ZIP	APOPKA, FL 32712	T Observe T	1 4 3 5 5 5		
NAME	S Eaton, Suzanne	☐ DETEIE	3.1 TIT			Change _	_ Addition		
STREET ADDRESS	5849 MARBLE COURT		3.2 NA				1		
	WINTER PARK FL			EET ADDRESS			1		
CITY-ST-ZIP TITLE	T T THE TABLE	DELETE	3.4. CH 4.1 TITI	Y-ST-ZIP		Change	Addition		
NAME	SUPPLEE, AL		4. 2 NA				, 7.00mor		
STREET ADDRESS	807 HARDWICK AVENUE			EET ADDRESS			ĺ		
CITY-ST-ZIP	ORLANDO FL			Y-ST-ZIP					
TITLE	D	DELETE	5.1 TiTl		В	☐ Change ≥	Addition		
NAME	GILLILAND, ED		5.2 NA	AE.	STEELF JERRY				
STREET ADDRESS	48 INTERLAKEN ROAD		1	EET ADDRESS	D STEELE, JERRY 6146 RANIER DR.				
CITY-ST-ZIP	ORLANDO FL			Y - ST - ZIP	ORLANDO, FL 32810	J			
TITLE	Ď	☐ DELETE	6.1 TITI				Addition		
NAME	SARLES, WANDA		6.2 NA	AE					
STREET ADDRESS	875 LOOKOUT LANE			EET ADDRESS					
CITY-ST-ZIP	OSTEEN FL			/-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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.