2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005027

FILED Aug 28, 2007 Secretary of State

Entity Name: VERO BEACH ORCHID SOCIETY, INC. **Current Principal Place of Business: New Principal Place of Business:** C/O IRA C HATCH, ESQ 1701 HWY A1A, STE 220 VERO BEACH, FL 32963 **New Mailing Address: Current Mailing Address:** P.O. BOX 543 VERO BEACH, FL 32961 US FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HATCH, IRA C 1701 HWY A1A. STE 220 US VERO BEACH, FL 32963 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition OLIVER, DIANE PHELPS, MARTHA Name: Name: Address: 3825 6TH PLACE Address: 1710 SAND DOLLAR WAY City-St-Zip: VERO BEACH, FL 32968 City-St-Zip: VERO BEACH, FL 32968 Title: () Delete Title: () Change () Addition Name: MEW, DOUG Name: Address: 5785 36TH LANE Address: City-St-Zip: VERO BEACH, FL 32966 City-St-Zip: Title: () Delete Title: () Change () Addition LONG, BARBARA Name: Name: 2097 CORTEZ AVENUE Address: Address: City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: PETRI, SALLI Name: ELLINGSWORTH, RON 2188 42ND CT SW 1507 31ST AVENUE Address: Address: City-St-Zip: VERO BEACH, FL 32968 City-St-Zip: VERO BEACH, FL 32960

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBARA E LONG T 08/28/2007