

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006360

FILED
Jan 07, 2010
Secretary of State

Entity Name: ST. AUGUSTINE ORCHID SOCIETY, INC.

Current Principal Place of Business:

3136 COUNTRY CREEK LANE
ST AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

3136 COUNTRY CREEK LANE
ST AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 86-1166211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARK, LOLA
3136 COUNTRY CREEK LANE
ST AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

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:

Title: P
Name: HIGGINS, JACK
Address: 269 N. CHURCHILL DRIVE
City-St-Zip: ST AUGUSTINE, FL 32086

Title: 1VP
Name: BOTTOM, SUSAN
Address: 6916 CYPRESS LAKE COURT
City-St-Zip: ST AUGUSTINE, FL 32086

Title: 2VP
Name: ROWE, VIVIENNE
Address: 108 DRAKE ROAD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: S
Name: STARK, LOLA
Address: 3136 COUNTRY CREEK LANE
City-St-Zip: ST AUGUSTINE, FL 32086

Title: T
Name: GOURLEY, WILLIAM
Address: 807 KALLI CREEK LANE
City-St-Zip: ST AUGUSTINE, FL 32080

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: WILLIAM T GOURLEY

T

01/07/2010

Electronic Signature of Signing Officer or Director

Date