

747 126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

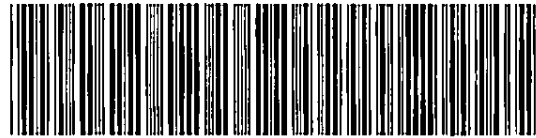
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800343303188

C O R P O R A T I O N N O T F O R P R O F I T

Word Processing: May 10, 1979

By: bc

A notification letter was mailed to: Sir
GAINESVILLE ORCHID SOCIETY
1513 NW 52nd Terrace
Gainesville, FL 32605
Money acknowledged: \$33.00
Processor File # 252

Corporation Name: GAINESVILLE ORCHID SOCIETY, INC.

Filing Date: May 9, 1979

Charter Number: 747126

747126

SECRETARY OF STATE

DATE: April 23 10 28

AMOUNT: \$ 33.00

TO THE ORDER OF: *Thirly three and 00/100*

DOLLARS

ATLANTIC BANK
Atlantic First National Bank of Gainesville
Gainesville, Florida

GAINESVILLE ORCHID SOCIETY

FOR ENCLOSURE PAPERS

[Signature]

MAY 9 1979

SECRETARY OF STATE

PRIVILEGE TAX	
C. TAX	
FILING	30
C. COPY	
R. A. FEE	3
P. COPY	
SEARCH	
TOTAL	33
BALANCE DUE	

APR 26 8 - 379 *****3.00

APR 26 12 - 378 *****30.00

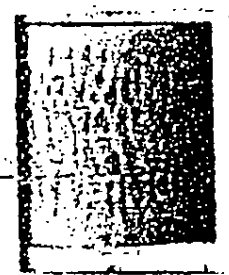
747166

AMC

Gainesville Orchid Society
Inc.

257 5A-79

R 88605





GEORGE FORTSONE
SECRETARY OF STATE

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304
(904) 488-8412

May 1, 1979

RECEIVED

MAY 9 9 37 AM 1979

DEPARTMENT OF REVENUE, DIRECTOR
MAIL ROOM
TALLAHASSEE, FLA.

Gainesville Orchid Society
1513 NW 52nd Terrace
Gainesville, FL 32605

FILED
MAY 9 12 05 PM '79
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

GAINESVILLE ORCHID SOCIETY, INC.

Returned xx; Pending ; Check acknowledged \$33.00

1. NAME IS NOT AVAILABLE
2. Name must include a corporate suffix, INC. or INCORPORATED.
3. BALANCE DUE:
4. The number of directors the corporation shall have (no less than three) must be shown with a statement designating the total number.
5. The articles state that there will be directors (initially). However, are listed.
6. The qualifications for membership and the manner of their admission to membership must be shown in the articles of incorporation. Please be specific.
7. xx The articles of incorporation must state who will manage the affairs of the corporation, and the times at which they will be elected or appointed. See addition to number 8.
8. Please list the officers and the office(s) held by each.
9. A designation of registered office and registered agent at the same street address must be contained within the articles of incorporation, and the registered agent must sign accepting that designation.
10. All incorporators must sign and their signatures must be acknowledged (notarized).
11. All incorporators signing must be listed in Article .
12. Notary Public's acknowledgement is incomplete.
13. The document(s) must be legible for microfilming (clear, black print on a white background).
14. You must list at least three (3) directors and three (3) incorporators. Please be sure to provide addresses for all.
15. The articles must state by whom the by-laws may be made, altered, or rescinded.
16. The articles must state by whom and in what manner amendments to the articles of incorporation may be made.
17.

ARTICLES OF INCORPORATION
GAINESVILLE ORCHID SOCIETY, INC.

747126

FILED
APR 25 1979
TALLAHASSEE, FLA.
We, the undersigned do hereby associate ourselves together for the purpose of forming a nonprofit corporation under the statutes of the State of Florida.

The name of the corporation is Gainesville Orchid Society,

The purposes for which the corporation is organized are to increase public interest in orchid growing in this area and to help its members to gain greater appreciation and knowledge of orchid culture.

3. Membership shall be open to all persons interested in the promotion of the objectives of the Society, by application.

4. The period of duration of this nonprofit corporation shall be perpetual.

5. The names and residence addresses of the subscribers are as follows:

<u>Name</u>	<u>Number & Street</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Bruce Ruiz	3716 NW 7th Avenue	Gainesville, FL	FL	32607
M.W. Gordon	4401 NW 122nd Street	Gainesville, FL	FL	32601
C.C. O'Connell	1513 NW 52 Terrace	Gainesville, FL	FL	32605

6. The officers of the corporation shall be the President, Vice-President, Secretary, and Treasurer, to be elected annually in accordance with the by-laws.

7. The names of the officers who are to serve until the first election or appointment are as follows:

<u>Name</u>	<u>Office</u>
Bruce Ruiz	President
Maggie Ruiz	Vice-President
John Isaac	Treasurer
Joe Ward	Secretary

RECEIVED
APR 25 2 08 PM 1979
DEPARTMENT OF STATE
TALLAHASSEE, FLA.

8. The affairs of the corporation shall be managed by the Board of Directors to be elected annually. The number of persons constituting the first Board of Directors shall be seven (7) whose names and addresses are as follows:

<u>Name</u>	<u>Number & Street</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Bruce Ruiz	3716 NW 7th Avenue	Gainesville, FL	FL	32607
Maggie Ruiz	3716 NW 7th Avenue	Gainesville, FL	FL	32607
John Isaac	1616 NW 39th Street	Gainesville, FL	FL	32605
Joe Ward	3625 SE 17th Avenue	Gainesville, FL	FL	32601
Carol Teiss	3723 SW 82nd Street	Gainesville, FL	FL	32601
Peg Forgnone	1522 NW 51st Terrace	Gainesville, FL	FL	32601
Buff Gordon	4401 NW 122nd Street	Gainesville, FL	FL	32601

9. The office of the corporation and the name of the resident agent are as follows:

<u>Office</u>	<u>Resident Agent Located at Office</u>
1513 NW 52nd Terrace, Gainesville, FL 32605	C. C. O'Connell

10. The by laws of the corporation may be made, altered or rescinded by a majority vote of the members as provided in the by-laws.

11. The articles of incorporation shall be approved by the Board of Directors, proposed by them to the members and approved by a majority vote of the members with or without a meeting.

12. Amendments to the articles of incorporation may be proposed by any member or by any Director.

13. The articles of incorporation may be amended by a majority of the members at any regular or special meeting of the members.

14. The corporation shall be nonstock and no dividends or pecuniary profits shall be declared or paid to any member thereof.

15. In the event of dissolution, the residual assets of the organization will be turned over to one or more organizations which themselves are exempt as organizations described in sections 501(c)(3) and 170(c)(2) of the Internal Revenue Code of 1954 or corresponding sections of any prior or future law, or to the Federal, State, or local government for exclusive public purpose.

In Testimony Whereof, we the Undersigned have set our hands and affixed our seals, this 23rd day of April, 1979.

Bruce Ruiz

L.S.

M.W. Gordon

L.S.

C.C. O'Connell
C.C. O'Connell

L.S.

April 24, 1979

STATE OF FLORIDA
COUNTY OF ALACHUA

Before me, the undersigned authority, personally appeared, Bruce Ruiz, M. W. Gordon and C. C. O'Connell, who are to me well known to be the persons described in and who subscribed the above articles of incorporation, and they did freely and voluntarily acknowledge before me according to law that they made and subscribed the same for the uses and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and my official seal, at Gainesville in said County and State this 24th day of April, 1979

Carol A. Jones
Notary Public
STATE OF FLORIDA

My commission expires:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXPIRES OCTOBER 28, 1979
BOARDED THRU MAYNARD BOARDSING AGENCY

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR
THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida Statutes, the
following is submitted:

First - That The Gainesville Orchid Society desiring to
organize or qualify under the laws of the state of Florida, with
its principal place of business at city of Gainesville, state of
Florida, has named C. C. O'Connell, located at 1513 NW 52nd
Terrace, city of Gainesville, state of Florida, as its agent to
accept service of process within Florida.

Bruce Ruiz, Corporate Officer

Title President

Date April 24, 1979

Having been named to accept service of process for the above
stated corporation, at the place designated in this certificate,
I hereby agree to act in this capacity, and I further agree to
comply with the provisions of all statutes relative to the proper
and complete performance of my duties.

C. C. O'Connell
C. C. O'Connell, Resident Agent

Date April 24, 1979

April 24, 1979

STATE OF FLORIDA
COUNTY OF ALACHUA

Before me, the undersigned authority, personally appeared, Bruce
Ruiz and C. C. O'Connell, who are to me well known to be the persons
described in and who subscribed the above certificate, and they
did freely and voluntarily acknowledge before me according to law
that they made and subscribed the same for the uses and purposes
therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and my official
seal, at Gainesville in said County and State this 24th day of
April, 1979.

Carol A. Davis
Notary Public
STATE OF FLORIDA

My commission expires:

NOTARY PUBLIC STATE OF FLORIDA - LARGO
MY COMMISSION EXPIRES OCTOBER 26, 1979
BONDED THRU MAYNARD BONDING AGENCY

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT		FLORIDA DEPARTMENT OF STATE George F. Rios Secretary of State DIVISION OF CORPORATIONS	DO NOT WRITE IN THIS SPACE AND FILED FEB 6 12 15 PM 1980 FLORIDA DEPARTMENT OF STATE CORPORATIONS DIVISION TALLAHASSEE, FLORIDA
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1980

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE.

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office 747126 GAINESVILLE ORCHID SOCIETY, INC. 1513 NW 52ND TERR GAINESVILLE, FL 32605 If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.	2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient. Street Address _____ P.O. Box No. _____ City _____ State _____ Zip Code _____
---	---

3. Date Incorporated or Qualified To Do Business in Florida 5/09/1979	4. Federal Employer Identification Number (FEIN) U/A	5. Date of Last Report
---	--	-------------------------------

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State
RUIZ, BRUCE	P/O	3716 NW 7TH AVE	GAINESVILLE, FL
RUIZ, MAGGIE	V/O	3716 NW 7TH AVE	GAINESVILLE, FL
ISAAC, JOHN	T/O	1616 NW 39TH ST	GAINESVILLE, FL
WARD, JOE	S/O	3625 SW 17TH AVE	GAINESVILLE, FL
FORNONE, PEG	D	1522 NW 51ST TERR	GAINESVILLE, FL
TEISS, CAROL	D	3723 SW 82ND ST	GAINESVILLE, FL

7. Registered Agent Information Name O'CONNELL, C.C. Street Address (Do NOT Use P.O. Box Number) 1513 NW 52ND TERR City, State and Zip Code GAINESVILLE, FL 32605	To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.
---	--

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

Typed Name of Signing Officer Henry Wallbrunn	Title President	Telephone Number 372-8250
--	----------------------------	--------------------------------------

Signature <i>Henry Wallbrunn</i>	Date 1/28/80
---	-------------------------

DO NOT WRITE IN THIS SPACE
747126-6-80

747126 02-01-80 27 455 10.00

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Friesen
Secretary of State
DIVISION OF CORPORATIONS

1981

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

APPROVED
FILED
MAY 22 9 50 AM 1981
DIVISION OF STATE
CORPORATIONS
FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office

747126
GAINESVILLE ORCHID SOCIETY, INC.
1513 NW 52ND TERR
GAINESVILLE, FL

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State

Zip Code

If above address is incorrect in any way, enter the correct address in Item 3. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida

5/09/1979

4. Federal Employer Identification Number (FEIN)

N/A

5. Date of Last Report

1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
Stern, William Louis	P/D	2126 NW 27th Terrace	GAINESVILLE, FL 32605
RUIZ, BRUCE		3716 NW 7TH AVE	
Mulhearn, James	V/D	Rt 1, Box 35-B-22	Archer, FL 32618
RUIZ, MAGGIE		3716 NW 7TH AVE	GAINESVILLE, FL
WARD, JOSEPH	T/D	3625 SE 17th Avenue	GAINESVILLE, FL 32601
ISAAC, JOHN		1616 NW 39TH ST	
Strambaugh, J. Philip	S/D	1728 NW 22nd Terrace	GAINESVILLE, FL 32605
WARD, JOE		3625 SE 17TH AVE	
Wallbrunn, Henry	D	7016 NW 20th Place	GAINESVILLE, FL 32605
FORENONE, REG		1622 NW 51ST TERR	
Smallwood, Bileen	D	806 NE 9th Avenue	GAINESVILLE, FL 32601
FEISS, CAROL		3725 SW 82ND ST	

7. Registered Agent Information

Name

O'CONNELL, C.C.

Street Address (Do NOT Use P.O. Box Number)

1513 NW 52ND TERR

City, State and Zip Code

GAINESVILLE, FL

32605

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3

8. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

Typed Name of Signing Officer

William Louis Stern

Title

President

Telephone Number

904-378-9229

Signature

William Louis Stern

Date

February 6, 1981

DO NOT WRITE IN THIS SPACE

747126 03-26-81 2 3 112 10.00

PRINTED COPY

LETTER SENT

SEP 19 11 32 AM '84 CUS SENT

*Danessville Orchid
Society, Inc*

SECRETARY OF STATE
REINSTATEMENT

FILED 9-10-84

INVOLUNTARILY
DISSOLVED 12-10-84

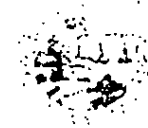
REINSTATEMENT 15.
CUS
REGISTERED AGENT 3.
OVERPAYMENT
72 Privilege Tax
73 Annual Report
74 Annual Report
75 Annual Report
76 Annual Report
77 Annual Report
78 Annual Report
79 Annual Report
80 Annual Report
81 Annual Report
82 Annual Report 20.
83 Annual Report 30.
84 Annual Report 20.
TOTAL 78.⁰⁰
REFUND

NAME AVAILABLE HL
REINSTATED BY HL 9-10-84
UPDATER HL 9-10-84
UPDATER VERIFYER _____

747126

ANNUAL REPORT

1984



Read Notice and Instructions on Other Side **BEFORE FILING**
 Filing Fee of \$10 Required - Make Checks Payable to Secretary of State

1. Name and Address of Corporation or Firm, if Office		2. Name and Address of Agent for Service of Process	
Gainesville Orchid Society P.O. Box 13954 University Station Gainesville, FL 32604		Gainesville, FL 32604	
3. Mailing Address in Florida, if any, other than the Street Address in Item 2. Include Zip Code		4. Date of Incorporation or Organization	
		12/14/82	
5. State of Incorporation or Organization		6. Nature of Business	
Florida		Non-profit	
7. Name and Street Address of Each Officer and Director, as of December 31, 1983			

Names of Officers and Directors	Title	Street Address in FL (Give full Director's Address, Not Office Box Number)	City and State
Charles A. Nemeth	Pres	8601 SW 5th. Place	Gainesville, FL 32607
Frank Wentzel Jr.	VP	3316 NW 3rd. Ave.	Gainesville, FL 32601
Florida Session	Treas	2324 NW 63rd. Terrace	Gainesville, FL 32601
Sherry W. Nemeth	Sec	8601 SW 5th. Place	Gainesville, FL 32607
William Louis Stern	Dir	2126 NW 27th. Terrace	Gainesville, FL 32605
Margaret Forgnone	Dir	11508 SW 24th. Ave.	Gainesville, FL 32601

Registered Agent Information

1. Name and Address of Current Registered Agent	2. Name and Address of New Registered Agent
Catherine C. O'Connell 1513 NW 52nd. Terrace Gainesville, FL 32605	Margaret Forgnone 11508 SW 24th. Ave. Gainesville, FL 32601

I, Pursuant to the provisions of Sections 604 and 607.01, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, hereby certifies this statement for the purpose of filing as its registered office or registered agent in both in the State of Florida.

June 14, 1984

This change was authorized by resolution duly adopted by the board of directors of

Signature of *Margaret Forgnone*
 Registered Agent Accepting Appointment

Date 8/15/84

\$3.00 additional fee required for Registered Agent changes.

9-10-84

fl

See signature restrictions under instruction on reverse side of this form

Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 604, Florida Statutes, and I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made On the Day

Signature of Signing Officer	Title	Date
Charles A. Nemeth	President	August 20, 1984
		Telephone Number
		904-376-0899

1. There is no other filing fee for this statement of the Agent for Service of Process, other than the fee for filing this statement.

2. This is a Certificate of Status, as required by Chapter 604, Florida Statutes, and the fee required for this statement is \$3.00.



Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

747-1
GAINESVILLE ORCHID SOCIETY, INC.
P.O. BOX 1824
UNIVERSITY STATION
GAINESVILLE, FL 32604

32604

03/09/1975

Applied For

09/10/1984

Name of Officer or Director	Type	Home Address of Each Officer or Director (Do NOT Use Post Office Box Number)	City and State
1. NEMETH, CHARLES A.	P	8801 SW 5TH PLACE	GAINESVILLE, FL
2. WENTZEL, JR., FRANK	V	3814 NW 3RD AVE.	GAINESVILLE, FL
3. JESSON, FREIDA	T	2324 NW 63RD TERRACE	GAINESVILLE, FL
4. NEMETH, SHERRY W.	S	8801 SW 5TH PLACE	GAINESVILLE, FL
5. STERN, WILLIAM LOUIS	C	2126 NW 27TH AVE.	GAINESVILLE, FL
6. FORGNONE, MARGARET	C	23508 SW 24TH AVE.	GAINESVILLE, FL

Registered Agent Information

A. Name and Address of Current Registered Agent	B. Name and Address of Same Registered Agent
FORGNONE, MARGARET 23508 SW 24TH AVE. GAINESVILLE, FL 32601	Name Street Address (Do NOT Use P.O. Box Number) City, State and Zip Code

I, the undersigned, Secretary of the State of Florida, do hereby certify that the above named corporation, organized under the laws of the State of Florida, is in good standing for the purpose of obtaining its right to be a registered agent of corporations in the State of Florida.

Witness my hand and the seal of the State of Florida, this 15th day of May, 1995.

Notary Public for the State of Florida

\$3.00 additional fee required for Registered Agent changes.

Signature of Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.

Signature of Secretary of the State of Florida. This Report Shall Have the Same Legal Effect As if Made Under Oath.

Signature of Charles A. Nemeth, President
Date: May 15, 1995
Telephone Number: 904-376-0890

\$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

INCORPORATION

ANNUAL REPORT
1986



CLARENCE W. HAMILTON, JR., Governor
GEORGE F. JOHNSON, Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED
MAY -5 1986

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required -- Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

747126
GAINESVILLE ORCHID SOCIETY, INC.
P.O. BOX 13904
UNIVERSITY STATION
GAINESVILLE, FL 32604

2 State District Address of Corporation Principal Office, P.O. Box Number ALMA is NOT Sufficient

State Address 01

P.O. Box No. 02

City and State 03

Zip Code 04

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3 Date of Incorporation or Revival 05/09/1979

4 Federal Employer Identification Number (EIN)

5 Date of Last Report 05/28/1986

6 List Street Addresses of Each Officer and Director as of December 31, 1985

Name of Officers and Directors	Title	Home Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State
HEMETH CHARLES A. DEWOLF, JAMES	P	8601 SW 5TH PLACE 926 N.W. 94th Street	GAINESVILLE, FL Gainesville, FL
LENIZEL JR., FRANK	V	3316 NW 3RD AVE.	GAINESVILLE, FL
WILSON, SUE	V	510 S.W. 4th Ave.	Gainesville, FL
SESSION, FREIDA	T	2324 NW 63RD TERRACE	GAINESVILLE, FL
WHEA, BEVERLY A.	T	ROUTE 2, BOX 0912	Gainesville, FL Melrose, FL
RIPKE, MARGARET	S	11508 SW 24TH AVE.	GAINESVILLE, FL
Ripke, Sarah	S	5725 N.W. 69th Drive	Gainesville, FL

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

FORDONE, MARGARET
11508 SW 24TH AVE.
GAINESVILLE, FL 32601

8 Name and Address of New Registered Agent

Name 01
Ripke, Sarah
Home Address (Do NOT Use P.O. Box Number) 02
5725 N.W. 69th Drive
City and State 03
Gainesville, FL 04 32606

In the presence of Secretary 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, desires to change its registered agent and to appoint the above named person as its new registered agent, and the corporation has authorized its secretary to execute this report as required by Chapter 607 of the Statutes of the State of Florida.

Signature of Registered Agent Accepting Appointment: Sarah E. Ripke DATE Apr 28, 1986

\$3.00 additional fee required for Registered Agent changes.

See separate restrictions under instructions on reverse side of this form

Notice: That All Officers of the Corporation, the Secretary of State, and the Corporation, shall be bound to execute this report as required by Chapter 607 of the Statutes of the State of Florida. This report shall have the same legal effect as if made by the Secretary of State.

Signature of Registered Agent
Sarah E. Ripke

Secretary

April 28, 1986

(904) 378-7945

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

REGISTRATION

ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA 32399
TELEPHONE (904) 493-2200

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

747126 1
GAINESVILLE GARDEN SOCIETY, INC.
P.O. BOX 13804
UNIVERSITY STATION
GAINESVILLE, FL 32604

1. Total Change of Address of First Registered Agent
Office: P.O. Box Number Address City State Zip

2. Total Change of Address of Second Registered Agent

3. Total Change of Address of Third Registered Agent

4. Total Change of Address of Fourth Registered Agent

5. Total Change of Address of Fifth Registered Agent

05/09/1979

05/05/1986

~~BRUCE RUIZ~~
BRUCE RUIZ

P

~~622 NW 94TH ST~~
4623 NW 13 AV

GAINESVILLE, FL

~~BRUCE RUIZ~~
BRUCE RUIZ

V

~~610 NW 1ST AVE~~
409 NW 32 ST

GAINESVILLE, FL

SEA, BEVERLY A

T

ROUTE 2, BOX 2972

~~GAINESVILLE, FL~~
MELROSE, FL

RIKE, SHAR

S

~~5755 NW 69TH DRIVE~~

GAINESVILLE, FL

~~SHAR RUIZ~~
SHAR RUIZ

397160 39 AV, No 42

REGISTERED AGENT INFORMATION

NAME: SHAR
5755 NW 69TH DRIVE
GAINESVILLE, FL
GAINESVILLE, FL 32606

BRUCE RUIZ

4623 NW 13 AV

Gainesville, FL 32605

[Signature]

2/22/87

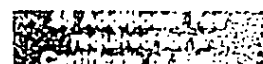
\$3.00 additional fee required for Registered Agent changes.

[Signature]

2/22/87

SHAR RUIZ

5104 475 1923



APPLICATION
FOR
REINSTATEMENT
1990

747126

Read Instructions on Other Side Before Mailing This Form
Make Check Payable To: Department of State

FILED
1991 MAY 28 PM 2:46
TALLAHASSEE, FLORIDA
SECRET
STATE

Name and Address of Corporation
Gainesville Orchid Society, Inc.

2. If Address is Being Changed, Indicate Below The Name of the Corporation and the New Address
Address
P. O. Box 13904
City and State
Gainesville, FL
Zip Code
32604

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3. Are you incorporated or chartered in the State of Florida?

4. FEI Number
593058763

5. FEI Number Applied For
6. FEI Number for Agent

7. Names and Street Addresses of Each Officer and Director

1. Title	2. Name of Officer and Director	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
P/D	Nancy Mason	2433 N.W. 68th Terr.	Gainesville, FL 32606
VP/D	Tom Sheehan	3823 S.W. 3rd Ave.	Gainesville, FL 32607
S/D	Jan Chapman	2201 N.E. 15th St.	Gainesville, FL 32609
T/D	Kareha Martin	6215 N.W. 57th Way	Gainesville, FL 32606
D	Charles A. Nemeth	8601 S.W. 5th Pl.	Gainesville, FL 32607
D	Jim Cooper	409 N.W. 32nd St.	Gainesville, FL 32607

REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent

Name
Charles A. Nemeth
Street Address (Do NOT Use Post Office Box Numbers)
8601 S.W. 5th Pl.
Street Address (Do NOT Use Post Office Box Numbers)
City and State
Gainesville
FL 32607

REINSTATEMENT

88-91
Cw

I, the undersigned, being a member of the Board of Directors of the Corporation, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief.

Signature of Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

I, the undersigned, being an officer or director of the corporation, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the corporation is in compliance with the provisions of the Florida Statutes relating to the reinstatement of corporations.

Date

05-22-91

Phone 904-376-9673

Thomas J. Sheehan

88-91
Cw
Certificate of Reinstatement

FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.

ANNUAL REPORT

1992



OFFICE OF THE SECRETARY OF STATE
DIVISION OF CORPORATIONS

JUN-29-92

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

Read Instructions on Other Side Before Making Entries
FILING FEE \$63.25 Make Payable To: Secretary of State

1. Filing Address of Corporation: **DOCUMENT #747126 (1)**

GAINESVILLE ORCHID SOCIETY, INC.
P.O. BOX 13904
UNIVERSITY STATION
GAINESVILLE FL 32604-1904

2. Address in Block 1 is correct and the corporation is not changing its address. If the corporation is changing its address, the name of the corporation and the filing address must be changed.

21. Filing Address

22. P.O. Box

23. City and State

24. ZIP

3. Date of Incorporation or Qualification to Do Business in Florida

05/09/1979

05/28/1991

59-3058763

4. Filing Fee

5. Filing Fee

\$8.75 Assistant Fee required for a Certificate of Status

CERTIFICATE OF STATUS

1. Name of Officer or Director	2. Address of Officer or Director	3. Name of Officer or Director	4. City and State
P/D MASON, NANCY T/D Lloyd Archie Green	2433 NW 68TH TERR. PO Box 306 NA		GAINESVILLE, FL Keystone Heights, FL.
V/P/D SHEEHAN, TOM	3823 SW 3RD AVE.		GAINESVILLE, FL
S/P/D CHAPMAN, JAN McCormick, Ethel	2201 NE 15TH ST. RE. 3, Box 437		GAINESVILLE, FL Live Oak, FL.
T/D MARTIN, MARSHA	6215 NW 57TH WAY		GAINESVILLE, FL
D NEMETH, CHARLES A.	8601 SW 5TH PL.		GAINESVILLE, FL
D COOPER, JIM	409 NW 32ND ST.		GAINESVILLE, FL

REGISTERED AGENT INFORMATION

NEMETH, CHARLES A.
8601 SW 5TH PLACE
GAINESVILLE, FL 32607

01. Name

02. Address

03. City and State

04. ZIP

FL

05. State

SIGNATURE

Lloyd A. Green

President

904-473-7376

File Now. Filing Fee after May 1 is \$225.00

ANNUAL REPORT

1993



Department of State
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation or **DOCUMENT # 747126 (1)**

**GAINESVILLE ORCHID SOCIETY, INC.
P.O. BOX 13904
UNIVERSITY STATION
GAINESVILLE FL 32604-1904**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporation or Cancellation **05/09/1979** 3a. Date of Last Report **08/02/1992**

4. FILING FEE
693058763

5. Corporation of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Corporation Being Liquidated or Trust Being Terminated ☐ **\$5.00 May be Added to Fee**

7. Reporters with 405-501-0000 Tax Exempt Status ☐ **\$138.75 Additional Fee Not Required**

8. This corporation has adopted a policy of non-discrimination in its policies (check one)
Federal (check one) ☐ State ☒ Local ☐

2. Filing Fee: ANNUAL REPORT \$41.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE

MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

2a. Principal Place of Business

2b. State, Apt. #, etc.

2c. City & State

2d. Country

9. Name and Address of Current Registered Agent

**NEMETH, CHARLES A.
8601 SW 5TH PLACE
GAINESVILLE FL 32607**

10. Name and Address of New Registered Agent

11. Name and Address of Secretary

12. Name and Address of Treasurer

13. Name and Address of Director

14. Name and Address of Director

15. Name and Address of Director

16. Name and Address of Director

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30. Name and Address of Director

31. Name and Address of Director

32. Name and Address of Director