

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704918

Entity Name: JACKSONVILLE ORCHID SOCIETY

Current Principal Place of Business:

3611 RICHMOND ST
JACKSONVILLE, FL 32205

Current Mailing Address:

3611 RICHMOND ST
JACKSONVILLE, FL 32205

FEI Number: 59-2138734

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAVIN, MARGARET
3611 RICHMOND ST
JACKSONVILLE, FL 32205 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 PRESIDENT
Name MCELROY, HARRY
Address 12010 HOOD LANDING RD.
City-State-Zip: JACKSONVILLE FL 32258

Title VP
Name RASMUSSEN, LOIS
Address 509 CARAWAY CT.
City-State-Zip: ST. JOHNS FL 32259

Title VP
Name RUSSELL, ART
Address 1811 NORWAY DR.
City-State-Zip: ORANGE PARK FL 32003

Title TREASURER
Name SCHWAB, STACEY
Address PO BOX 57732
City-State-Zip: JACKSONVILLE FL 32241

Title SECRETARY
Name STOMFAY-STITZ, TAMMY
Address 1419 RENSSELAER AVE.
City-State-Zip: JACKSONVILLE FL 32205

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: HARRY MCELROY

PRESIDENT

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date