

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000004224

**Entity Name:** KRULL-SMITH ORCHIDS, INC.

**Current Principal Place of Business:**

26423 STATE RD 46  
SORRENTO, FL 32776

**Current Mailing Address:**

PO BOX 1479  
SORRENTO, FL 32776 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TAYLOR, SCOTT B  
26423 STATE RD 46  
SORRENTO, FL 32776 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 D  
Name TAYLOR, SCOTT B  
Address PO BOX 1479  
City-State-Zip: SORRENTO FL 32776

Title D  
Name TAYLOR, ELAINE B  
Address PO BOX 1479  
City-State-Zip: SORRENTO FL 32776

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SCOTT B. TAYLOR

**DIRECTOR**

**01/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date