

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # 707912	
1. Entity Name TAMPA ORCHID CLUB, INC.	

Principal Place of Business 12213 LANGSHAW DR THONOTOSASSA FL 33592-2733 US	Mailing Address 12213 LANGSHAW DR THONOTOSASSA FL 33592-2733 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE		CR2E037 (10/07)	
4. FEI Number 59-1234454		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HEBERT, WILLIAM H 12213 LANGSHAW DR THONOTOSASSA FL 33592-2733	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____	DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HEBERT, WILLIAM H 12213 LANGSHAW DR THONOTOSASSA FL 33592-2733 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CASTENS, BILL 4640 LANDSCAPE DR TAMPA FL 33624 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIFFEN, JENEVY 2909 MOSSY TIMBER TRAIL VALRICO FL 33594 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILEY, ALICE 17023 DENNIS RD LUTZ FL 33558 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CLARKSON, JIM 4713 FOXSHIRE CIR TAMPA FL 33624 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSTON, KAREN 1113 WINDHORST RIDGE DRIVE BRANDON FL 33510 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William H Hebert* **1-22-08** **813 986 1568**