## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 724779**

Entity Name: DAYTONA BEACH ORCHID SOCIETY, INC.

FILED Mar 03, 2004 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
SICA HALI 1065 DAY	-	US			
Current M	ailing Addres	s:	New Maili	New Mailing Address:	
P. O. BOX HOLLY HII	250194 L, FL 321250	194 US			
FEI Number:	: 23-7256690	FEI Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
3065 W. S ORMOND The above	TON, JOHN C TATE RD. 40 BEACH, FL 3.		urpose of changing i	its registered office or registered agent, or both,	
in the State	e of Florida.				
SIGNATURE:					
	Electron	ic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () PEARSON, RO' 75 LINCOLN AV ORMOND BEAC	E.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () PALMER, JOHN 437 N. HALIFA) DAYTONA BEA	CAVE. APT 5	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition HICKS, MICHAEL 40 COQUINA POINT DR ORMOND BEACH, FL 32174	
Title: Name: Address: City-St-Zip:	D () PLUMLEE, JER 40 COQUTNA P ORMOND BEAC	OINT DR.	Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition PLUMLEE, JERRY 40 COQUTNA POINT DR. ORMOND BEACH, FL 32174	
Title: Name: Address: City-St-Zip:	D () GRAY, RITA 4505 CLYDE M DAYTONA BEA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () MITCHELL, HAR 5972 SHADY C PORT ORANGE	REEK LANE	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition STORY, SALLY 127 S HALIFAX AVE DAYTONA BEACH, FL 32118	
Title: Name: Address: City-St-Zip:	S () APPLEBY, PEG 20 COQUINA P ORMOND BEAG	Γ DR	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BOND, CHERYL 723 HORSEMAN DR PORT ORANGE, FL 32127	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROYDEN A. PEARSON P 03/03/2004