2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2012
Secretary of State

DOCUMENT# 730829

Entity Name: DELRAY BEACH ORCHID SOCIETY, INC.

Current Principal Place of Business:

802 N.E. 1ST ST.
DELRAY BCH, FL 33483

New Principal Place of Business:

6093 HELICONIA ROAD
DELRAY BCH, FL 33484

Current Mailing Address:

P.O. BOX 6571
DELRAY BEACH, FL 334826571

New Mailing Address:

FEI Number: 59-1672315 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROCKINGTON, SELVEST E
2725 SW 5TH STREET
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

SECAUL, EDWIN L
6093 HELICONIA ROAD
DELRAY BEACH, FL 33484 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: EDWIN L. SECAUL 01/04/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MCCARTHY, NANCY
Address: 474 SW 29 STREET
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP
Name: ROSEN, CARYN
Address: 12529 VIA RAVENNA
City-St-Zip: BOYNTON BEACH, FL 33436

Title: 2VP
Name: WATTS, ANN
Address: 4587 BLUE PINE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: T
Name: SECAUL, EDWIN
Address: 6093 HELICONIA ROAD
City-St-Zip: DELRAY BEACH, FL 33484

Title: S
Name: PARZOW, MYRA
Address: 13915 VIA NIDIA
City-St-Zip: BOYNTON BEACH, FL 33436

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: EDWIN L. SECAUL T 01/04/2012
Electronic Signature of Signing Officer or Director Date