2000 UNIFORM BUSINESS REPORT (UBR)

3615 BOGGY CREEK RD KISSIMMEE FL 34744-9416

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

3. Mailing Address

Suite, Apt. #, etc.

3615 BOGGY CREEK RD KISSIMMEE FL 34744-9416

FILED May 02, 2000 8:00 am Secretary of State **DOCUMENT # 739760** 1. Entity Name 05-02-2000 90107 049 ****61.25 BROMELIAD SOCIETY OF CENTRAL FLORIDA, INC. Principal Place of Business



DO NOT WRITE IN THIS SPACE

City & State		City & State		4. FEI Number			Applied For
				59-1882896			Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent Elizabeth

Street Address (P.O. Box Number is Not Acceptable

WOOD, J.BRIAN 37 CROTON DR. ORLANDO FL 32807

<u>issimmee</u>

Zip Code **34744-94**16

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.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW:

9. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

FEE IS \$01.25			Added to 1 ccs	Departin	citt of otate	,	
10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSON GEOFF 3961 MARKHAM WOODS RD LONGWOOD FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCCRORY, 3615 BOGGY Kissimmed	Elizabeth Creek Rd FL 34744-	9416	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HALL, EDWARD 1111 GLEN GARRY CIRCLE MAITLAND FL 32751	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Boardman, 2425 Peacod ST Cloud Fo		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MCCRORY, ELIZABETH 3615 BOGGY CREEK RD KISSIMMEE FL 34744	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Jones, Kellu 8231 Shube Orlando FL		∑ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HANDLEY, PEGGY 711 MONMOUTH WAY WINTER PARK FL 32742	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Dworkin, F 253 Liverpo		□ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	,	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY_ST_TIR		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-7IP			Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: