

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739760

FILED
Apr 03, 2007
Secretary of State

Entity Name: BROMELIAD SOCIETY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1920 N. FOREST AVE.
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 536961
ORLANDO, FL 328536961

New Mailing Address:

FEI Number: 59-1882896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRORY, ELIZABETH A
3615 BOGGY CREEK RD.
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

RICHARD, RECTOR D
2188 BENT OAK DRIVE
APOPKA, FL 32712 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: RICHARD D. RECTOR

04/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STEVENS, ROBERT
Address: 27213 PINE ST
City-St-Zip: YALAHUA, FL 347973185

Title: VD () Delete
Name: SIGN, GARY
Address: 1307 KEATS AVE
City-St-Zip: ORLANDO, FL 328096364

Title: TD () Delete
Name: MCCORRY, ELIZABETH
Address: 3615 BOGGY CREEK DR.
City-St-Zip: KISSIMMEE, FL 347449416

Title: SD () Delete
Name: ANDREAS, KAREN
Address: 617 FIFTH ST.
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FORCE, FRANCIS B
Address: 2812 KELLY PARK ROAD
City-St-Zip: APOPKA, FL 32712

Title: VD (X) Change () Addition
Name: EKENGREN, NEAL A
Address: 317 NORTH FOX CHASE PLACE
City-St-Zip: LONGWOOD, FL 327793371

Title: TD (X) Change () Addition
Name: RECTOR, RICHARD D
Address: 2188 BENT OAK DRIVE
City-St-Zip: APOPKA, FL 32712

Title: SD (X) Change () Addition
Name: ALMAGUER, DANIEL R
Address: 536 KITTREDGE DRIVE
City-St-Zip: ORLANDO, FL 328051328

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: RICHARD D. RECTOR

TD

04/03/2007

Electronic Signature of Signing Officer or Director

Date