

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

01-18-2005 90046 005 ****61.25

DOCUMENT # 743894 1. Entity Name FORT LAUDERDALE ORCHID SOCIETY, INC.					
Principal Place of Business 1955 E. OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33306			Mailing Address PO BOX 4677 FORT LAUDERDALE, FL 33338		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
6. Name and Address of Current Registered Agent ANSLEY, BARBARA JEAN 701 E. COMMERCIAL BLVD., STE 3RD FLOOR FORT LAUDERDALE, FL 33334				7. Name and Address of New Registered Agent Name HENLEY ROBERT H Street Address (P.O. Box Number is Not Acceptable) 4508 NE 21st Lane City FT. LAUDERDALE FL Zip Code 33308	
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 <u><i>Robert H. Henley</i></u> DATE <u>2-11-05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DYKE, NORA 3316 EN 39 ST. FORT LAUDERDALE, FL 33308 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROBERT H. HENLEY ☐ Change ☒ Addition 4508 NE 21st Lane FT. LAUDERDALE, FL 33308 TREASURER ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HILL, SYLVIA 16355 VIA VENETIA W DELRAY BEACH, FL ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLANC, TOM 6111 NW 34 WAY FORT LAUDERDALE, FL 33309 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHERER, PHILLIP 6101 NW 34 WAY FORT LAUDERDALE, FL 33309 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COLEMAN, RUSTY 9675 NW 39 CT CORAL SPRINGS, FL 33085 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COGAR, ALLAN 1315 NE 25 AVE POMPANO BEACH, FL 33062 ☐ 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 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: <u><i>Robert H. Henley</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				DATE <u>1-14-05</u> Date Daytime Phone #	

1/

66001866



01142005 Chg-NP CR2E037 (10/03)

4. FEI Number
23-7372473

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	DYKE, NORA	
STREET ADDRESS	3316 EN 39 ST.	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308	
TITLE	P	☐ Delete
NAME	HILL, SYLVIA	
STREET ADDRESS	16355 VIA VENETIA W	
CITY-ST-ZIP	DELRAY BEACH, FL	
TITLE	VP	☐ Delete
NAME	BLANC, TOM	
STREET ADDRESS	6111 NW 34 WAY	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309	
TITLE	D	☐ Delete
NAME	SCHERER, PHILLIP	
STREET ADDRESS	6101 NW 34 WAY	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309	
TITLE	VP	☐ Delete
NAME	COLEMAN, RUSTY	
STREET ADDRESS	9675 NW 39 CT	
CITY-ST-ZIP	CORAL SPRINGS, FL 33085	
TITLE	D	☐ Delete
NAME	COGAR, ALLAN	
STREET ADDRESS	1315 NE 25 AVE	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	ROBERT H. HENLEY	☐ Change ☒ Addition
NAME	ROBERT H. HENLEY	
STREET ADDRESS	4508 NE 21st Lane	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33308	
TITLE	TREASURER	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #