

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001356

FILED
Jan 11, 2008
Secretary of State

Entity Name: BOCA RATON ORCHID SOCIETY, INC.

Current Principal Place of Business:

POST OFFICE BOX 276367
BOCA RATON, FL 334276367

New Principal Place of Business:

1790 NW SPANISH RIVER BLVD
BOCA RATON, FL 33427

Current Mailing Address:

POST OFFICE BOX 276367
BOCA RATON, FL 334276367

New Mailing Address:

FEI Number: 01-0551635 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOGABOOM, DAVID
3200 NW 29 AVE.
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOGABOOM, DAVID
Address: 3200 NW 29 AVE.
City-St-Zip: BOCA RATON, FL 33434

Title: VPD () Delete
Name: KELLY, FORD
Address: 21588 CASA MONTE CIRCLE
City-St-Zip: BOCA RATON, FL 33433

Title: VPD () Delete
Name: FISHER-TIPTON, SUE
Address: 7870 W. STANWAY PLACE
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: ROWAN, LORIE
Address: 734 SW 7 STREET
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: MCMULLEN, DONNA
Address: 990 NE. 2 TERR
City-St-Zip: BOCA RATON, FL 33432

Title: D () Delete
Name: WOOD, JACQUELINE
Address: 1360 SW 18 ST.
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: WOOD, JACQUELINE
Address: 1360 SW 18 STREET
City-St-Zip: BOCA RATON, FL 33486

Title: VPD (X) Change () Addition
Name: WESOLOWSKI, SHARON
Address: 5632 NW 88 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D (X) Change () Addition
Name: HAARSGAARD, LAURIE
Address: 10441 CANOE BROOK CIRCLE
City-St-Zip: BOCA RATON, FL 33498

Title: D (X) Change () Addition
Name: CONOVER, LORRAINE
Address: 5702 WIND DRIFT LANE
City-St-Zip: BOCA RATON, FL 33433

Title: D (X) Change () Addition
Name: STOTT, FE
Address: 2455 SW 17 CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify 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: DAVID HOGABOOM

PD

01/11/2008

Electronic Signature of Signing Officer or Director

Date