2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005884

FILED Feb 15, 2012 Secretary of State

Entity Name: FORT PIERCE ORCHID SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

8105 9TH HOLE DR 5412 NW EMBLEM ST.

PORT SAINT LUCIE, FL 34952 PORT ST. LUCIE, FL 34983

Current Mailing Address: New Mailing Address:

8105 9TH HOLE DR 5412 NW EMBLEM ST.

PORT SAINT LUCIE, FL 34952 PORT ST. LUCIE, FL 34983

FEI Number: 46-0466111 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORGAN, PAUL R JR.

8105 9TH HOLE DR

ZEBLIN, RITA A
5412 NW EMBLEM ST.

PORT SAINT LUCIE, FL 34952 US PORT ST. LUCIE, FL 34983 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: RITA A. ZEBLIN

Electronic Signature of Registered Agent 02/15/2012

Date

OFFICERS AND DIRECTORS:

 Title:
 PRES

 Name:
 TOZER, BILL

 Address:
 300 BRADLEY ST.

 City-St-Zip:
 FORT PIERCE, FL 34982

Title: VPRE

Name: STEPHENSON, PAMELA Address: 325 NORTH FFA RD. City-St-Zip: FORT PIERCE, FL 34945

Title: SECR

 Name:
 ORTSEIFER, MICHAEL

 Address:
 202 NE CAMELOT DR.

 City-St-Zip:
 PORT. ST. LUCIE, FL 34983

Title: TREA

 Name:
 ZEBLIN, RITA A

 Address:
 5412 NW EMBLEM ST.

 City-St-Zip:
 PORT ST. LUCIE, FL 34983

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: RITA A. ZEBLIN TREA 02/15/2012