

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N11240**

1. Entity Name

ALLIED ORCHID AND BROMELIAD EXHIBITORS, INC.

FILED

00 APR -3 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

17711 130 AVE. N.
JUPITER FL 33478

Mailing Address

17711 130 AVE. N.
JUPITER FL 33478-4606

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2798561

Applied

Not Applied

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

PRIESS, NANCY
17711 130 AVE. N.
JUPITER FL 33478

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Nancy E. Priess, Secretary

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-31-00

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	KELLY, WARREN	
STREET ADDRESS	10885 SW 95TH ST.	
CITY-ST-ZIP	MIAMI FL 33176	

TITLE	D	☒ Delete
NAME	SHERWOOD, JOHN	
STREET ADDRESS	9360 SW 32ND ST.	
CITY-ST-ZIP	OCALA FL 32876	

TITLE	D	☐ Delete
NAME	PRIESS, NANCY	
STREET ADDRESS	17711-130TH AVE. N.	
CITY-ST-ZIP	JUPITER FL 33478	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	☐ Change ☒
NAME	KENNE JUD	
STREET ADDRESS	18988 Juno Isles Blvd.	
CITY-ST-ZIP	North Palm Beach, Fla	

TITLE	Vice President.	☐ Change ☒
NAME	Karen Kowalowski	
STREET ADDRESS	2017 NE 13th Ave.	
CITY-ST-ZIP	Cape Coral, Fl 33909	

TITLE		☐ Change ☐
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Treasurer	☐ Change ☐
NAME	Bob Cashen	
STREET ADDRESS	1701 S.E. Cypress Park Lane	
CITY-ST-ZIP	Jupiter Fla. 33478	

TITLE	Trustee	☐ Change ☐
NAME	Bill Byrd	
STREET ADDRESS	6302 Green Road	
CITY-ST-ZIP	Lakeland, Fla 33810	

TITLE	Trustee	☐ Change ☐
NAME	Bill Taylor	
STREET ADDRESS	23201 N River Road	
CITY-ST-ZIP	Alva, Fla. 33920	

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NANCY E. PRIESS, SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-2000 (561) 747-97

Date

Daytime Phone

Fax

E-mail

Signature