

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2008 8:00 am**  
**Secretary of State**

05-05-2008 90236 034 \*\*\*\*61.25

**DOCUMENT # N33503**

1. Entity Name  
ORCHID ISLAND GOLF & BEACH COMMUNITY  
ASSOCIATION, INC.



Principal Place of Business  
1 BEACHSIDE DR  
TOWN OF ORCHID, FL 32963 US

Mailing Address  
1 BEACHSIDE DR  
TOWN OF ORCHID, FL 32963 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02192008 Chg-NP CR2E037 (12/06)

4. FEI Number  
65-0194373

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ERICKSON, PAUL  
340 ROYAL PONCIANNA  
PALM BEACH, FL 33480

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

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 VPD ☒ Delete  
NAME REARDON, BARRY  
STREET ADDRESS 608 HERON PT CIR.  
CITY-ST-ZIP ORCHID, FL 32963

TITLE D ☒ Delete  
NAME CONNORS, JOSEPH  
STREET ADDRESS 40 BCHSIDE DR 301  
CITY-ST-ZIP VERO BEACH, FL 32963

TITLE PD ☒ Delete  
NAME LEARY, STEPHEN  
STREET ADDRESS 39 LINDIES DR.  
CITY-ST-ZIP VERO BEACH, FL 32963

TITLE D ☒ Delete  
NAME VINER, TERYL  
STREET ADDRESS 913 ORCHID PT WAY  
CITY-ST-ZIP VERO BEACH, FL 32963

TITLE STD ☒ Delete  
NAME JOHNSON, REID  
STREET ADDRESS 922 ORCHID POINT WAY  
CITY-ST-ZIP VERO BEACH, FL 32963

TITLE D ☐ Delete  
NAME MILSTEN, NANCY  
STREET ADDRESS 545 WHITE PELICAN CIRCLE  
CITY-ST-ZIP VERO BEACH, FL 32963

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☒ Change ☐ Addition  
NAME Reid Johnson  
STREET ADDRESS 922 orchid point way  
CITY-ST-ZIP orchid, FL 32963

TITLE Vice President ☒ Change ☐ Addition  
NAME Joseph Connors  
STREET ADDRESS 40 Beachside Dr. #301  
CITY-ST-ZIP orchid, FL 32963

TITLE Sec./Treasurer ☐ Change ☒ Addition  
NAME Robert Ripp  
STREET ADDRESS 920 orchid point way  
CITY-ST-ZIP orchid, FL 32963

TITLE Director ☐ Change ☒ Addition  
NAME Mary Grandy  
STREET ADDRESS 708 Grove place  
CITY-ST-ZIP orchid, FL 32963

TITLE Director ☐ Change ☒ Addition  
NAME Gene Canfield  
STREET ADDRESS 530 white pelican circle  
CITY-ST-ZIP orchid, FL 32963

TITLE Director ☐ Change ☒ Addition  
NAME Michael Lazor  
STREET ADDRESS 20 Beachside Dr. #101  
CITY-ST-ZIP orchid, FL 32963

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Reid Johnson Reid Johnson, President 4/23/08 772-388-0816