

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41063

FILED
Apr 27, 2010
Secretary of State

Entity Name: FLAGLER COUNTY ORCHID SOCIETY, INC.

Current Principal Place of Business:

5 BLEAU CT
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

5 BLEAU CT
PALM COAST, FL 32137

New Mailing Address:

P O BOX 1445
FLAGLER BEACH, FL 32136

FEI Number: 59-3034946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHURCH, JOSEPH R.
5 BLEAU CT
PALM COAST, FL 32137 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: T
Name: LONG, JEANNE
Address: PO BOX 1445
City-St-Zip: FLAGLER BEACH, FL 32136

Title: TR
Name: DAVIS, BARBARA
Address: 20 COTTONTON CT
City-St-Zip: PALM COAST, FL 32137

Title: P
Name: CHURCH, JOSEPH R.
Address: 5 BLEAU CT
City-St-Zip: PALM COAST, FL

Title: TR
Name: DEVANE, MARYLOU
Address: 39 BUD FIELD DR
City-St-Zip: PALM COAST, FL 32137

Title: V
Name: STROIKE, HOMER
Address: 18 PANORAMA DR
City-St-Zip: PALM COAST, FL 32164

Title: TR
Name: SCHEFFLER, PHYLLIS
Address: POB 350638
City-St-Zip: PALM COAST, FL 321350638

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: JEANNE R. LONG

T

04/27/2010

Electronic Signature of Signing Officer or Director

Date