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Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N95000003877 (6)**

1. Corporation Name
GREATER ORLANDO ORCHID SOCIETY INC.

Principal Place of Business	Mailing Address
4143 EDGEWATER DRIVE ORLANDO FL 32804	4143 EDGEWATER DRIVE ORLANDO FL 32804

3. Date Incorporated or Qualified: 08/15/1995

4. FEI Number: 59-3327753 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 [redacted]	26
Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
City & State 23	28 City & State
Zip 24 / Country 25	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

KOKIN, MONROE J
704 FOREST VIEW COURT
WINTER SPRINGS FL 32709

10. Name and Address of New Registered Agent

81 Name: CAROL MEYER
82 Street Address (P.O. Box Number Is Not Acceptable): 1164 GALAHAD DRIVE
83
84 City: CASSELBERRY FL 85 Zip Code: 32707

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Carol Meyer 2/14/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PRINCE, CHARLOTTE J		1.2 NAME		
STREET ADDRESS	4143 EDGEWATER DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32804		1.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	2.1 TITLE	T	☑ Change ☐ Addition
NAME	KOKIN, MONROE J		2.2 NAME	CAROL MEYER	
STREET ADDRESS	704 FOREST VIEW CT		2.3 STREET ADDRESS	1164 GALAHAD DRIVE	
CITY-ST-ZIP	WINTER SPRINGS FL 32708		2.4 CITY-ST-ZIP	CASSELBERRY FL 32707	
TITLE	VP	☐ DELETE	3.1 TITLE	VP	☑ Change ☐ Addition
NAME	DAILEY, DONNA		3.2 NAME	DIANA MOSS	
STREET ADDRESS	8308 PORT SAID ST.		3.3 STREET ADDRESS	5858 COVE DRIVE	
CITY-ST-ZIP	ORLANDO FL 32817		3.4 CITY-ST-ZIP	ORLANDO, FL 32812	
TITLE	DBM	☐ DELETE	4.1 TITLE	DBM	☑ Change ☐ Addition
NAME	HODGKINS, BILL		4.2 NAME	MARTHA ARROYO	
STREET ADDRESS	922 PINE SHADOW DR.		4.3 STREET ADDRESS	2326 ASHINGTON PK. DRIVE	
CITY-ST-ZIP	APOPKA FL 32712		4.4 CITY-ST-ZIP	APOPKA, FL 32703	
TITLE	DBM	☐ DELETE	5.1 TITLE	DBM	☑ Change ☐ Addition
NAME	HANCOCK, BILL		5.2 NAME	JOYCE CHITWOOD	
STREET ADDRESS	17601 DAVENPORT RD.		5.3 STREET ADDRESS	4072 NORTH FT. CHRISTMAS ROAD	
CITY-ST-ZIP	WINTER GARDEN FL 34787		5.4 CITY-ST-ZIP	CHRISTMAS, FL 32709	
TITLE	DBM	☐ DELETE	6.1 TITLE	DBM	☑ Change ☐ Addition
NAME	CARTER, MARY V		6.2 NAME	EDWARD FRENK	
STREET ADDRESS	394 MEAD DR.		6.3 STREET ADDRESS	1012 DELANEY AVE	
CITY-ST-ZIP	OVIEDO FL 32765		6.4 CITY-ST-ZIP	ORLANDO, FL 32806	

CR2E037 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Carol Meyer 1/15/98 407 6952122