2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N95000003877

Entity Name: GREATER ORLANDO ORCHID SOCIETY INC.

Current Principal Place of Business:

4143 EDGEWATER DRIVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

4143 EDGEWATER DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-3327753 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEYER, CAROL
1164 GALAHAD DRIVE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

SMITH, ELLEN B
1612 NEW AMSTERDAM WAY
ORLANDO, FL 32818 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: ELLEN B. SMITH 04/30/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PRINCE, JOY
Address: 4143 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: DBM ( ) Delete
Name: MOSS, DIANA J
Address: 5858 COVE DR
City-St-Zip: ORLANDO, FL 32812

Title: D ( ) Delete
Name: CLARK, JIM
Address: 111 N. SHIRLEY AVE.
City-St-Zip: SANFORD, FL 32771

Title: DBM ( ) Delete
Name: MEYER, CAROL
Address: 1164 GALAHAD DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: PP ( ) Delete
Name: PRINCE, DONALD
Address: 4143 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: S ( ) Delete
Name: JACKOWSKI, PATRICIS
Address: 2739 BASS LAKE BLVD
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DBM (X) Change ( ) Addition
Name: SMITH, ELLEN B
Address: 1612 NEW AMSTERDAM WAY
City-St-Zip: ORLANDO, FL 32818

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ELLEN B. SMITH DBM 04/30/2007
Electronic Signature of Signing Officer or Director Date