

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002945

FILED
Mar 22, 2009
Secretary of State

Entity Name: ORCHID BOULEVARD CORPORATION

Current Principal Place of Business:

1919 SE 45TH ST
CAPE CORAL, FL 33904 US

New Principal Place of Business:

1929 SE 44TH STREET
CAPE CORAL, FL 33904 US

Current Mailing Address:

1919 SE 45TH ST
CAPE CORAL, FL 33904 US

New Mailing Address:

1929 SE 44TH STREET
CAPE CORAL, FL 33904 US

FEI Number: 65-0847770

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAIGE, NANCY J
91919 SE 45TH ST
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

PAIGE, NANCY J
1919 SE 45TH ST
CAPE CORAL, FL 33904 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: NANCY J. PAIGE

03/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PAIGE, NANCY J
Address: 1919 SE 45TH ST
City-St-Zip: CAPE CORAL, FL 33904

Title: V () Delete
Name: OSTER, BARBARA VPRES
Address: 4457 ORCHID BLVD
City-St-Zip: CAPE CORAL, FL 33904

Title: S () Delete
Name: PAIGE, NANCY S
Address: 1919 SE 45TH STREET
City-St-Zip: CAPE CORAL, FL 33904

Title: T () Delete
Name: BOYO, BEVERLY
Address: 1929 SE 44TH ST
City-St-Zip: CAPE CORAL, FL 33904

Title: S () Delete
Name: BOYO, BEVERLY
Address: 1929 SE 44TH ST
City-St-Zip: CAPE CORAL, FL 33904

Title: TR () Delete
Name: BOYD, AL TR
Address: 1929 SE 44TH STREET
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PAIGE, NANCY J PRES
Address: 1919 SE 45TH ST
City-St-Zip: CAPE CORAL, FL 33904

Title: V (X) Change () Addition
Name: GEIST, MARY ANN VPRES
Address: 1724 SE 44TH ST
City-St-Zip: CAPE CORAL, FL 33904

Title: S (X) Change () Addition
Name: WALTERS, JOAN SECR
Address: 1737 SE 43RD STREET
City-St-Zip: CAPE CORAL, FL 33904

Title: T (X) Change () Addition
Name: BOYD, BEVERLY A TREAS
Address: 1929 SE 44TH ST
City-St-Zip: CAPE CORAL, FL 33904

Title: TR (X) Change () Addition
Name: PAIGE, BOB TR
Address: 1919 SE 45TH ST
City-St-Zip: CAPE CORAL, FL 33904

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: BEVERLY A BOYD

TREA

03/22/2009

Electronic Signature of Signing Officer or Director

Date