

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004233

FILED
Apr 09, 2004
Secretary of State

Entity Name: ALLIED ORCHID & BROMELIAD EXHIBITORS, INC.

Current Principal Place of Business:

15703 69TH DR. N
PB GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

15703 69TH DR. N
PB GARDENS, FL 33418

New Mailing Address:

FEI Number: 31-7663407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUDD, KENNI
15703 69TH DR. N
PB GARDENS, FL 33418 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: D () Delete
Name: PREISS, NANCY
Address: 17711 130TH AVE. N.
City-St-Zip: JUPITER, FL 33478

Title: VSTD () Delete
Name: JUDD, KENNI
Address: 15703 69TH DR. N
City-St-Zip: PB GARDENS, FL 33418

Title: PD () Delete
Name: KOWALESKI, KAREN
Address: 16160 SADDLEWOOD LN
City-St-Zip: CAPE CORAL, FL 33991

Title: D () Delete
Name: CASHEN, ROBERT
Address: 17711 130TH AVE. N.
City-St-Zip: JUPITER, FL 33478

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: PREISS, NANCY
Address: 17711 130TH AVE. N.
City-St-Zip: JUPITER, FL 33478

Title: STD (X) Change () Addition
Name: JUDD, KENNI
Address: 15703 69TH DR. N
City-St-Zip: PB GARDENS, FL 33418

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 for the exemption stated in Section 119.07(3)(i), 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: KENNI F. JUDD

SEC

04/09/2004

Electronic Signature of Signing Officer or Director

Date