

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000078651

FILED
May 01, 2009
Secretary of State

Entity Name: GHOST ORCHID ANTIQUES AND COLLECTIBLES INC

Current Principal Place of Business:

RENNINGERS FLEA MARKET 20651 US HWY 441
BUILDING G, SPACES 6, 7 & 8
MT. DORA, FL 32757 US

New Principal Place of Business:

Current Mailing Address:

31208 DEAL DR
SORRENTO, FL 32776

New Mailing Address:

FEI Number: 20-1216196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC FEE, BONNIE
31208 DEAL DRIVE
SORRENTO, FL 32776 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: MCFEE, BONNIE R PRES
Address: 31208 DEAL DRIVE
City-St-Zip: SORRENTO, FL 32776 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE RAE MCFEE

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date