

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P27399

FILED
Jul 09, 2007
Secretary of State

Entity Name: AMERICAN ORCHID SOCIETY, INC.

Current Principal Place of Business:

16700 AOS LANE
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

16700 AOS LANE
DELRAY BEACH, FL 33446 US

New Mailing Address:

FEI Number: 04-2161893 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JORDAN, JAMES W. JR.
16700 AOS LANE
DELRAY BEACH, FL 33446 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: P () Delete
Name: FIGHETTI, CALOS
Address: HC-03 BOX 8125
City-St-Zip: GUAYNABO, PR 009719710

Title: V () Delete
Name: RASSMANN, CHRIS
Address: 150 GOLDEN EAGLE DRIVE
City-St-Zip: HAMMONTON, NJ 08037

Title: V () Delete
Name: RHODEHAMEL, WILL
Address: 8440 WEST 82ND STREET
City-St-Zip: INDIANAPOLIS, IN 462781062

Title: D () Delete
Name: JORDAN, JAMES W
Address: 16700 AOS LANE
City-St-Zip: DELRAY BEACH, FL 33446

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: () 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: JAMES W. JORDAN, JR

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07/09/2007

Electronic Signature of Signing Officer or Director

Date