2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 16, 2007 8:00 am DOCUMENT # P95000006906 **Secretary of State** 1. Entity Name 03-16-2007 90034 008 ***150.00 ORCHID ISLAND REALTY, INC. Principal Place of Business Mailing Address 1 BEACHSIDE DRIVE 3125 WINDSOR BLVD. VERO BEACH FL 32963 VERO BCH FL 32963 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 65-0558339 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo QUINN, JEROME D Street Address (P.O. Box Number is Not Acceptable) 3111 CARDINAL DRIVE VERO BEACH FL 32963 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. HILLE Addition Delete nni Change BROUGH, JOHN A. NAMI NAME 3125 WINDSOR BLVD STRUCT ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY SE-ZIP CHY ST 71P ☐ Delete 11111 ☐ Change ☐ Addition QUINN, JEROME D 3111 CARDINAL DRIVE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CHY-ST-/IP CHY ST ZIP HITLE 11111 **≱** Addition TOOMEY, ROBERT NAMI мамі FORD, JANE A. 3125 WINDSOR BLVD STREET ADDRESS STREET LADDRESS 3125 WINDSOR BLVD. CITY-ST-7IP VERO BEACH FL COY ST ZIE VERO BEACH, FL 32963 DILLE ☐ Delete Change □ Addition NIEDERPRUEM, ROBERT NAME NAME 1 BEACHSIDE DR STREET ADDRESS STREET ADDRESS VERO BEACH FL 32965 CHY ST-ZIP CHY ST ZIP DHE Delete 11111 ☐ Change Maddition NAMI NAMI STREET ADDRESS STREET ADDRESS CITY S1-7IP CITY ST ZIP mu ☐ Delete шш Change Addition NAMI. NAMI STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHY-ST ZIP

12. I hereby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Jane A. Ford

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