

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000078931

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: REDLAND PROFESSIONAL ORCHID GROWERS, INC.

## Current Principal Place of Business:

26505 SW 203 AVE  
HOMESTEAD, FL 33031

## New Principal Place of Business:

## Current Mailing Address:

26505 SW 203 AVE  
HOMESTEAD, FL 33031

## New Mailing Address:

FEI Number: 65-0697308

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RANDALL, ROBERT  
26505 SW 203 AVE  
HOMESTEAD, FL 33031 US

## Name and Address of New Registered Agent:

PETERS, BILL  
18755 SW 248 ST  
HOMESTEAD, FL 33031 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: BILL PETERS

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BRETSNYDER, LYNN  
Address: 14400 SW 248 ST  
City-St-Zip: PRINCETON, FL 33032

Title: SD ( ) Delete  
Name: PETERS, BILL  
Address: 18755 SW 248 ST  
City-St-Zip: HOMESTEAD, FL 33031

Title: PD ( ) Delete  
Name: RANDALL, ROBERT  
Address: 26505 SW 203 AVE  
City-St-Zip: HOMESTEAD, FL 33031

Title: TD ( ) Delete  
Name: CAMERON, KEN  
Address: 26620 SW 203 AVE  
City-St-Zip: HOMESTEAD, FL 33031

Title: D ( ) Delete  
Name: BALDAN, BARBARA  
Address: 20075 SW 10 AVE  
City-St-Zip: HOMESTEAD, FL 33187

Title: D (X) Delete  
Name: MOTES, MARTIN  
Address: 25000 SW 162 AVE  
City-St-Zip: HOMESTEAD, FL 33031

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: EXPOSITO, JOSE  
Address: 25750 SW 177 AVE  
City-St-Zip: HOMESTEAD, FL 33031

Title: STD (X) Change ( ) Addition  
Name: PETERS, BILL  
Address: 18755 SW 248 ST  
City-St-Zip: HOMESTEAD, FL 33031

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BALDAN, BARBARA  
Address: 20075 SW 180 AVE  
City-St-Zip: MIAMI, FL 33187

Title: D (X) Change ( ) Addition  
Name: MOTES, MARTIN  
Address: 25000 SW 162 AVE  
City-St-Zip: HOMESTEAD, FL 33031

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: BILL PETERS

STD

04/30/2007

Electronic Signature of Signing Officer or Director

Date