FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P9700000511 (0)

WRIGHT'S ORCHIDS, INC.

FILED Mar 07 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 1072 CRYSTAL BOWL CIR 1072 CRYSTAL BOWL CIR CASSELBERRY FL 32707 CASSELBERRY FL 32707-4537					
				3. Date Incorporated or Qualified 12/26/1996	3a. Date of Last Report
2. Principal Place of Business	2a, Mailing Address			4. FEI Number	Applied For
21	26	· · · · · · · · · · · · · · · · · · ·		59-341124	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc	2.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	27 City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
h	ountry Zip	Coun	ry	8. This corporation has liability for	
24 25	29 ddress of Current Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No
WRIGHT, ROBERT L	duress of Current Registered Agent		1 Name	10. Name and Address of New A	Mistered When
1072 CRYSTAL BOWL CIR			2 Street Add	ress (P.O. Box Number is Not Accepta	hla\
CASSELBERRY FL 32707		ľ	Street Addi	ress (F.O. Box Number is Not Accepta	
		E	3		
		ε	4 City		85 Zip Code
Tala Discount to November 1	Sections 607.0502 and 607.1508, Florida 5	Ctatutae the pho		and in a dample this statement for the	FL 100 Zip Gode
office or registered agent, or	both, in the State of Florida, Such change	was authorized	by the corporal	tion's board of directors. I hereby acce	pt the appointment as registered
	accept the obligations of, Section 607.050	us, Fiorida Statu	:es.		
SIGNATURE Stignature, typest or profes	d harrio of registered agen; and title if applicable	(NOTE Registered /	lgent signature requi	red when reinstating)	DATE
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	
THE WOODE DODE	POEST DON, COD DELET				Change Addition
NAME WRIGHT, ROBE STREET ADDRESS 1072 CRYSTAL		1.2 NAM	·		
OACCEI DEDDY		Y "	ET ADDRESS		
TITLE CASSELBERRY			-ST-ZIP		Change Addition
NAME LISE		22 NAM			יים אוניים אוניים ביים
STREET ADDRESS 1071. C	austal Bowl Cf		ET ADDRESS		
CITY-ST-ZIF CACCITY	6024 RL 32707		(-ST-ZIP		<i>r</i>
TOPASCE					Change Addition
NAME KAREN	WHIGHT	3.2 NAN	E		
STREET ADURESS	central Bour CRI	3,3 STRI	ET ADDRESS		
CHY-ST-ZIP CASCEC	Berry FL 3270	· · · · · · · · · · · · · · · · · · ·	/-ST-ZIP	·	
TITLE	L. DELET	4.1 TITU			Change
NAME		4. 2 NA)			
STREET ADDRESS		•	ET ADDRESS		
C(TY+S1+ZIP	DELET		-ST-ZIP		Change Addition
TILE NAME	ل المراد	E 5.1 TITL 5.2 NAN			The countries The volution
í l		l l			
STREET ADDRESS			ET ADDRESS		
CHY-SI-ZE ²	DELET		-ST-ZIP		Change Addition
NAME	C Deter	62 NAN	1		em country and control
STREET ADORESS			EET ADDRESS		
CITY - ST - 21F		•	-ST-ZIP		
0111 01:49		0.4 0111	97.54		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or Block 12 or Block 12 or Block 13 or Block 13 or Block 13 or Block 14 or Block 15 or Block

SIGNATURE: