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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90136 002 ***150.00

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	OCUMENT	#	S7	7223
1.	Corporation Name		U,	, 200

ORCHID ISLAND TECHNOLOGIES, INC.

Principal Place		Mailie e Addrosa						
	e of Business	Mailing Address						
505 BEACHLAIN	D BLVO.	505 BEACHLAND BLVD.						
SUITE #1-245 VERO BEACH FL 32963		VERO BEACH FL 32963	SUITE #1-245 VEDO REACH FL 32963		DO NOT WRITE IN THIS SPACE			
VEHO BEACH FL 32903		TOTAL DENOTITE OF SOC	VERO BEACH FE 32303		3. Date Incorporated or Qualifed			
					08/28/1991			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Apr	ollied For
1/130 CLDE DOUBLOON DR.		26 P.O. BOX	- T- 2 AC. I		65-0284903		→ Not	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	- 				\$8.75 A	delitional
2 -		27		_	5. Certifcate of Status Desired		Fee Re	quired
City & State		City & State	- 11	•,	6. Election Campaign Financing		\$5.00	Мау Ве
3 VERO	BEACH <u>F</u> L	28 VERO BEA	CH, T	<u>L.</u>	Trust Fund Contribution		Added to	ees
Zip	Country	Zip	Country		8. This corporation owes the curre			~
3276	3 25 U.SA	29 32/64-3566	<u>يل ا30</u>	<u>5A.</u>	Personal Property Tax.			No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Re	egisterec A	gent	
	- IOVA- A		81	Name				
	DERVEER, JOYCE S.		82	Street Add	ress (P.O. Box Number is Not Acceptate	ble)		
	OLDE DOUBLOON DRIVE							
	BOX 3566		83					
VERG	O BEACH FL 32964		84	City			85 Zip C	cde
				•		FL	L	
office or re	to the provisions of Sections 607.05	e of Florida, Such change was a				the appoint	ment as reg	ji⊲tered
agent. i ar	m familiar with, and accept the oblig	gations of, Section 607.0505, Flor	ithorized by tr ida Statutes.	ie corpora i	on's board of directors. I hereby accept	the appoint		
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SIGNATURE	m familiar with, and accept the oblig	gations of, Section 607.0505, Ficr	ida Statutes.	ie corpora i	on's board of directors. I hereby accept	DATE		
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SIGNATURE 12. TITLE	rn familiar with, and accept the oblig	gent and title if applicable (NOTE	Registered Agent s	ie corpora i	on's board of directors. I hereby accept	DATE ICERS / ND	DIRECTO	FS IN 12
SIGNATURE 12. TITLE NAME	Signature. Typed or printed narie of registered as DFFICERS A VANDERVEER, JOYCE S.	gent and title if applicable (NOTE	Registered Agent s 13. 1.1 TITLE	e corpora i	on's board of directors. I hereby accept	DATE ICERS / ND	DIRECTO	FS IN 12
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officer or director of the corporation or the rece ver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change 1, or on an attacament with an address, with all other like empowered

SIGNATURE:

Sina LIDE AND TYPED OF PRINTED NAME OF SIGNING OFFIC IS OF DIRECTOR

4/17/99 (56,) 234-8103