

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700443

Entity Name: SOUTH FLORIDA ORCHID SOCIETY INC**Current Principal Place of Business:**18700 SW 69TH STREET
FORT LAUDERDALE, FL 33332**Current Mailing Address:**P.O. BOX 328615
FORT LAUDERDALE, FL 33332 US**FEI Number:** 59-0597590**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHRISTENSEN, DANIEL K
18700 SW 69TH STREET
SW RANCHES, FL 33332 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:** DANIEL K. CHRISTENSEN

01/19/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name CHRISTENSEN, DANIEL K
Address 18700 SW 69TH STREET
City-State-Zip: FORT LAUDERDALE FL 33332

Title D
Name COLLINS, CHRISTA
Address 18820 BELVIEW DR
City-State-Zip: MIAMI FL 33157

Title D
Name CHRISTENSEN, DANIEL K
Address 18700 SW 69 ST
City-State-Zip: FT LAUDERDALE FL 33332

Title D
Name HERNANDEZ, ARGEO
Address 3320 NW 16 TER
City-State-Zip: MIAMI FL 33125

Title D
Name HUNT, RON
Address 8955 SW 21 TER
City-State-Zip: MIAMI FL 33165

Title PRESIDENT
Name CAHIZ, CARLOS
Address 12337 S.W. 130TH STREET
City-State-Zip: MIAMI FL 33186

I hereby 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 all other like empowered.

SIGNATURE: DANIEL K. CHRISTENSEN

TREASURER

01/19/2017

Electronic Signature of Signing Officer/Director Detail

Date