

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701688

Entity Name: CENTRAL FLORIDA ORCHID SOCIETY INC**Current Principal Place of Business:**1920 N. FOREST AVE.
ORLANDO, FL 32803-1537**Current Mailing Address:**POST OFFICE BOX 3105
ORLANDO, FL 32802-3105**FEI Number:** 59-6151072**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BEDFORD, MARGARET W
1788 CINNAMON CIRCLE
CASSELBERRY, FL 32707-4042 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:** MARGARET W BEDFORD

02/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	BEHM, BRIAN
Address	47520 POINSETTIA RD
City-State-Zip:	ALTOONA FL 32702

Title	TD
Name	BEDFORD, MARGARET W
Address	1788 CINNAMON CIRCLE
City-State-Zip:	CASSELBERRY FL 32707-4042

Title	SECRETARY, RECORDING
Name	SCOTT, TERI
Address	8 LAKE DRIVE
City-State-Zip:	DEBARY FL 32713

Title	VP
Name	ERLACHER, LORI
Address	1620 MOSHER DR
City-State-Zip:	ORLANDO FL 32810

Title	OFFICER, PAST PRESIDENT
Name	TOLENTINO, JOSELITO P
Address	1367 ACORN CIRCLE
City-State-Zip:	APOPKA FL 32703

Title	CORRESPONDING SECRETARY
Name	BALDERSON, NANCY
Address	123 DUNCAN TRAIL
City-State-Zip:	LONGWOOD FL 32779

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: MARGARET W. BEDFORD

CFOS TREASURER

02/25/2019

Electronic Signature of Signing Officer/Director Detail

Date