

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714299

**Entity Name:** SOUTH DADE AMATEUR ORCHID CLUB, INC.

**Current Principal Place of Business:**

PINECREST GARDENS  
111ST. STREET AND SW 57 AVENUE MAIN LOBBY  
PINECREST, FL 33255

**Current Mailing Address:**

1930 SW 57 PLACE  
MIAMI, FL 33155 US

**FEI Number: 59-2343759**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SAN MARTIN JR., CARLOS  
1930 SW 57 PLACE  
MIAMI, FL 33155 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name DAVISON, MELANA  
Address P.O.BOX 343573  
City-State-Zip: FLORIDA CITY, FL 33034

Title DIR  
Name COTARELO, ANTONIO  
Address 10340 SW 111 STREET  
City-State-Zip: MIAMI FL 33176

Title DIR  
Name CORSON, LYNN  
Address 17375 SW 299 STREET  
City-State-Zip: MIAMI FL 33030

Title T  
Name CERNA, MARIA  
Address 14458 SW174 TERR.  
City-State-Zip: MIAMI FL 33177

Title S  
Name COTARELO, NAYA  
Address 10340 SW 111 STREET  
City-State-Zip: MIAMI FL 33176

Title D  
Name SAN MARTIN JR., CARLOS  
Address 1930 SW 57 PLACE  
City-State-Zip: MIAMI FL 33155

*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: CARLOS SAN MARTIN JR.**

**DIR**

**03/20/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date