


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000002401
 1. Entity Name
 GOLDEN TIGER BENEVOLENT SOCIETY, INC.



Principal Place of Business 39 MELLON LANE TENAFLY, NJ 07670	Mailing Address 39 MELLON LANE TENAFLY, NJ 07670
--------------------------------------------------------------------	--------------------------------------------------------

DO NOT WRITE IN THIS SPACE



04052006 No Chg-NP CR2E037 (11/05)

4. FEI Number 04-3594939	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 GREEN, CHARLES B JR.
 633 S. ANDREWS AVENUE
 SUITE 200
 FORT LAUDERDALE, FL 33301

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILLER, KENNETH 39 MELLON LANE TENAFLY, NJ 07670
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SATIR, STEVEN 608 GLASMERE ROAD MAHWAH, NJ 07430
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LITTLER, DEBORAH 1876 ALDEN ST DELAND, FL 32720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENHAUS, MICHAEL 2011 COUNTRY CLUB PRADO CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRENTICE, JOHN 226 G. SO. LEVAN STREET ALLENTOWN, PA 18102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARMER, WILLIAM 155 THIRD STREET #7 ATLANTA, GA 30308

U00000532435
 05/06/06-80082-017 61.25

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth W. Miller*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *4/17/06* Daytime Phone #: *212-589-6267*

KENNETH W. MILLER