


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # N98000007291 1. Entity Name ST. ANNE'S GARDENS, INC.	
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Principal Place of Business 11410 N KENDALL DR # 201 MIAMI, FL 33176	Mailing Address 11410 N KENDALL DR # 201 MIAMI, FL 33176
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01162006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FCI Number 65-0895598	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

**J. PATRICK FITZGERALD, ESQUIRE
 110 MERRICK WAY
 SUITE 3-B
 CORAL GABLES, FL 33134**

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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 _____
Sign in ink. Type or printed name of agent and firm if applicable. (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 QUINLIVAN, J M 5730 SW 74 ST # 300 SOUTH MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY ST ZIP	VD ABELLO, EUGENE 6522 SW 138 CT MIAMI, FL 33163
TITLE NAME STREET ADDRESS CITY ST ZIP	ST SOMARRIBA, MARCUS REV. 13401 NW 28 AVE OPA LOCKA, FL 33054
TITLE NAME STREET ADDRESS CITY ST ZIP	
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 02/25/06-80007-007 61.25

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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: *James L. Seal* 1/25/2006 305.757.2804
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #