

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702215

FILED  
Apr 28, 2006  
Secretary of State

**Entity Name:** SUSIE C. HOLLEY CRADLE NURSERY, INC.

**Current Principal Place of Business:**

1301 N W 6 COURT  
FT LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

1301 N W 6 COURT  
FT LAUDERDALE, FL 33311

**New Mailing Address:**

**FEI Number:** 59-0812613

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GROOMS, EVELYN  
2360 N.W. 11TH STREET  
FORT LAUDERDALE, FL 33311 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FYE, LILLIE  
Address: 91 NW 33 TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD ( ) Delete  
Name: PRATT, ROSALYN  
Address: 4951 NW 16TH COURT  
City-St-Zip: LAUDERHILL, FL 33313

Title: TD ( ) Delete  
Name: HARRISON, MARIE  
Address: 433 NW 17TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Delete  
Name: WILLIAMS, BARBARA  
Address: 451 SW 30TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Delete  
Name: SIMMONS, ALZORA  
Address: 727 NW 15TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: M ( ) Delete  
Name: GROOMS, EVELYN  
Address: 2360 NW 11 STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: EVELYN GROOMS

M

04/28/2006

Electronic Signature of Signing Officer or Director

Date