## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 23, 2006 8:00 am Secretary of State

DOCUMENT # 709047  1. Entity Name SARASOTA SUCCULENT SOCIETY  Principal Place of Business 1310, 29TH STDEET 1310, 29TH STDEET						<b>t</b> ,		ary 01 6 90015 024			
1310 38TH STREET 1310 38TH STREET SARASOTA, FL 34234 SARASOTA, FL 34234								0.1 86800 86000 86000 87000		ÍTRA DA FATRA	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01102006	Chg-NP	CR2E037 (1	1/05)		
City & State			City & State			4. FEI Number Applied For 23-7317366 Not Applicable					
Zip.			Zip			5. Certificate of Status Desired \$8.75 Additional Fee Required					
_ <del></del>	6. Name	and Address of Current 9	Registered Agent		Name , r			Registered Agent	<u> </u>		
LANG, HEDWIG 4158 PALAU DR SARASOTA EL 24244					Street Address (P.O. Box Number is Not Acceptable)						
SARASOTA, FL 34241					City SARASOTA FL Zip Cod						
						RASOTA FL Zip Code 24/					
8. The above the obligat	named entitions of regis	ty submits this statement for tered agent.	the purpose of changing its	registere	ed office or registe	red agent, or both	, in the State of Fl	orida. I am familia	ar with,	and accept	
SIGNATURE.	Signature, types	educing	d when reinstating)		2-18-	0	6				
		ne is \$61.25 May 1, 2006		9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees  Make check payable to Florida Department of State				
10.		OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHAI	NGES TO OFFICE	RS AND DIRECT	ODC IN	10	
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	334 BIRD		C) Delete	NAME STRE	Ε	·					
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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 cath; 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: WILDA Q. MEIGE 2/7/06 (94) 924-0706

SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFECT OR DISCECTOR

Date Date Date Description of Discentific Proces of Discentific Process o