

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED FEB -1 PM 3:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # 736440 (9)					
1. Corporation Name South Florida Fern Society Inc. 11730 South West 72 Ave. Miami Fl 33156-4616					
Principal Place of Business		Mailing Address South Florida Fern Society Inc. 11730 S.W. 72 Ave. Miami Fl. 33156-4616			
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		7/23/1976	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		237205479	
City & State		City & State		Applied For	
23		28		<input checked="" type="checkbox"/> Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/>	
24		29		\$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
Thomas G. Moore 6880 S.W. 75 Ter. South Miami Fl. 33143				81 Name Sidney M. Silverman	
				82 Street Address (P.O. Box Number is Not Acceptable) 11730 S.W. 72 Ave.	
				83	
				84 City Miami Fl	
				FL 85 Zip Code 33156-4616	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.					
SIGNATURE		Sidney M. Silverman		1-19-99	
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS					
1.1 TITLE <input type="checkbox"/> DELETE					
NAME Sidney M. Silverman					
STREET ADDRESS 11730 S.W. 72 Ave.					
CITY-ST-ZIP Miami, Fl 33156-4616					
1.2 NAME <input type="checkbox"/> DELETE					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE <input type="checkbox"/> DELETE					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
9000002766319--5					
-02/05/99--01096--014					
*****61.25 *****61.25					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.					

SIGNATURE: Sidney M. Silverman Sidney M. Silverman 1/19/99 305-235-3559

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)