

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 736440

1. Entity Name

SOUTH FLORIDA FERN SOCIETY INC.

**FILED**  
**Jan 24, 2000 8:00 am**  
**Secretary of State**

01-24-2000 90045 027 \*\*\*\*61.25

Principal Place of Business

11730 S.W. 72ND AVENUE  
MIAMI FL 33156-4616  
US

Mailing Address

11730 S.W. 72ND AVENUE  
MIAMI FL 33156-4616  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7205479

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75-Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SILVERMAN, SIDNEY M  
11730 S.W. 72ND AVENUE  
MIAMI FL 33156-4616

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME SILVERMAN, SIDNEY M  
STREET ADDRESS 11730 S.W. 72ND AVENUE  
CITY-ST-ZIP MIAMI FL 33156-4616 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD  
NAME BOGAARDS, MARTHA  
STREET ADDRESS 7100 SW 62ND AVE  
CITY-ST-ZIP MIAMI FL 33143 ☒ Delete

TITLE VPD  
NAME RICHARD ZWICK  
STREET ADDRESS 264 NAVAJO ST  
CITY-ST-ZIP MIAMI SPRINGS, FL 33166 ☒ Change ☒ Addition

TITLE TD  
NAME JOHNSON, MARILYN  
STREET ADDRESS 7002 SW 149TH TERR  
CITY-ST-ZIP MIAMI FL 33158-2151 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD  
NAME HOLT, VALERIE  
STREET ADDRESS 1050 NE 122ND ST  
CITY-ST-ZIP NORTH MIAMI FL 33161-5827 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME FEILD, WILLIAM  
STREET ADDRESS 6900 SW 112TH ST  
CITY-ST-ZIP MIAMI FL 33156 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME HOLT, ROBERT  
STREET ADDRESS 1050 NE 122ND ST  
CITY-ST-ZIP NORTH MIAMI FL 33161-5827 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-2000 305-235-3559

Date

Daytime Phone #

CR2E037 (9/99)