

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N42297	
1. Entity Name FLAMINGO GARDENS ORCHID SOCIETY, INC.	

Principal Place of Business 5410 LAGOON DR. DANIA BEACH, FL 33312 US	Mailing Address 5410 LAGOON DR. DANIA BEACH, FL 33312 US
---	---



01312006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0132216	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ERVING, RONALD E 5410 LAGOON DR. FORT LAUDERDALE, FL 33312
--

**DO NOT WRITE
IN THIS SPACE**

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 _____ (Signature, typed or printed name of registered agent and title if applicable) **(NOTE: Registered Agent signature required when re-registering)** **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**

000000447917
03/08/06-80076-017 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HURST, STEVEN 7442 MCKINLEY ST HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KERN, JAMES 8790 GRIFFIN RD COOPER CITY, FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DREW, DOUG 13450 NW 1ST STREET PLANTATION, FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ERVING, RONALD E 5410 LAGOON DRIVE FT. LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS HURST, SUZANNE 7442 MCKINLEY STREET HOLLYWOOD, FL 33024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS HENLEY, DELORES 3600 SW 137TH AVE MIRAMAR, FL

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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: Ronald E. Erving **RONALD E. ERVING** 2/23/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **TREASURER** Date Overtime Phone #

954-061-41