

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H65089

Entity Name: 1700, INC.

FILED
Jan 10, 2006
Secretary of State

Current Principal Place of Business:

% CARL K. LAMBRECHT
1700 9TH STREET., N. #A
ST. PETERSBURG, FL 33704

Current Mailing Address:

% CARL K. LAMBRECHT
1700 9TH STREET., N. #A
ST. PETERSBURG, FL 33704

New Principal Place of Business:

CARL K. LAMBRECHT
1700 DR. MLK JR. STREET N
ST. PETERSBURG, FL 33704

New Mailing Address:

CARL K. LAMBRECHT
1700 DR. MLK JR. STREET N
ST. PETERSBURG, FL 33704

FEI Number: 59-2555602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBRECHT, CARL K.
1700 NINTH ST. N.
SUITE A
ST. PETERSBURG, FL 33704 US

Name and Address of New Registered Agent:

LAMBRECHT, CARL K.
1700 DR. MLK JR. STREET N
ST. PETERSBURG, FL 33704 US

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: CARL K. LAMBRECHT

01/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BAYNARD, J. THOMAS,
Address: 1700 DR. ML KING ST N #C
City-St-Zip: ST. PETERSBURG, FL

Title: D () Delete
Name: BAYNARD, WILLIAM T., SR.
Address: 1700 DR. ML KING ST N #C
City-St-Zip: ST. PETERSBURG, FL

Title: DP (X) Delete
Name: LAMBRECHT, CARL K.,
Address: 1700 DR. ML KING ST N #A
City-St-Zip: ST. PETERSBURG, FL

Title: D (X) Delete
Name: LAMBRECHT, LEE ANN,
Address: 1700 DR. ML KING ST N #A
City-St-Zip: ST. PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAMBRECHT, CARK K
Address: 1700 DR. MLK JR. STREET N
City-St-Zip: ST. PETERSBURG, FL 33704

Title: D (X) Change () Addition
Name: LAMBRECHT, LEE ANN
Address: 1700 DR. MLK JR. STREET N
City-St-Zip: ST. PETERSBURG, FL 33704

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL K. LAMBRECHT

PRES

01/10/2006

Electronic Signature of Signing Officer or Director

Date