FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N9200000074  1. Entity Name							Jan 22, 2001 8:00 am Secretary of State					
3406 N	ORTH ROOSEVELT BOULEVA	ARD CORPORATION					01-22-2001 9014					
	e of Business	Mailing Address										
1201 WHITE ST. 1201 WHITE ST.												
102 102 KEY WEST FL 33040-3328 KEY WEST FL 33040-3328						0006209						
UŞ	Linds and the second se	ปร					1118 1841 1841 1841 1861 1861 18	<b>1</b> 111 <b>16</b> 115 <b>16</b> 11	) <b>88</b> ()) <b>68</b> ()) (6	HEIL BLEET LIEB		
2. Principal P	lace of Business	3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & Stat	e ,	City & State				4. FEI Numbe	65-0368637			plied For t Applicable		
Zip	Country	Zip	Cou	ntry		5. Certificate	of Status Desired		8.75 Add	litional		
	6. Name and Address of Current	Registered Agent				7. Name and	Address of New Reg	istered Ag	ent			
				Name		and the second	The second second of the second					
HUTTON, SUZANNE A.				Street Address (P.O. Box Number is Not Acceptable)								
502 WHITEHEAD ST.												
COURTHOUSE ANNEX, 3RD FLOOR KEY WEST FL 33040				City	City FL Zip Code ,							
8. The above	named entity submits this statement for	the purpose of changing its	registere	ed office o	r register	ed agent, or bot	h, in the state of Floric	ia.	1			
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Registered	1 Agent signat	ure required	when reinstating)		DATE				
	FILE NOW: FEE IS \$61.25	9. Election Campaign Trust Fund Contrib		ng 🔲	<b>\$5.0</b> Added	May Be to Fees		Check Pa rtment o	yable to f State			
10.	OFFICERS AND DIF	ECTORS	11.		A	ADDITIONS/CHA	NGES TO OFFICERS	AND DIRE	CTORS IN	10		
TITLE	D ALEVA	☐ Delete	TITLE					ĺ	Change	☐ Addition		
NAME STREET ADDRESS	WHEELER, ALEXA 85960 OVERSEAS HWY		NAME	ET ADDRESS								
CITY-ST-ZIP	ISLAMORADA FL 33036			-ST-ZIP								
TITLE	D	<b>D</b> elete	TITLE		0		On 1	[	Change	Addition		
NAME STREET ADDRESS	LEWIS, SALLY 401 SOUTH ST.		NAME	ET ADDRESS	Tur	ner, Car s angela	men St.					
CITY-ST-ZIP	KEY WEST FL 33040			ST-ZIP		u west		40				
TITLE	DV	Delete ··	TITLE	- <del></del>	5 ( 2		•	ſ	Change	Addition		
NAME	TAPOROWSKI, VINCE		NAME	•	<u>in</u>	ustina u	Dein hofer	•				
STREET ADDRESS CITY-ST-ZIP	1014 W. Shore Dr. Big pine Key Fl 33043			ET ADDRESS -ST-ZIP	50	00×43	0 60 T	NLL-2				
TITLE	DIO FINE NET PL 33043	Delete	TITLE		D	rine Le	4, FL 330		Change	Addition		
NAME	WICKERS, WILLIAM	GET DOUGLO	NAME		MA	TT BA	BICH Street	•				
STREET ADDRESS	161 KEY HAVEN RD.											
CITY-ST-ZIP	KEY WEST FL 33040	——————————————————————————————————————		ST-ZIP	tey	West	FL 33041			□ Addition		
TITLE NAME	INGRAM, MICHAEL	☐ Delete	TITLE					i	Change	Addition		
STREET ADDRESS	1118 FLEMING ST.			ET ADDRESS								
CITY-ST-ZIP	KEY WEST FL		CITY-	ST-ZIP								
TITLE	D TEAL BUSCELL	Delete	TITLE		D	= Hidal	ING	[	Change	Addition		
NAME STREET ADDRESS (	TEALL, RUSSELL		NAME STREE	ET ADDRESS		BOY 522	2808					
CITY-ST-ZIP	111 SAGUARO LANE MARATHON FL			ST-ZIP	MA	2A THON	SHORES, FO	330	200	1		
12 I hereby (	pertify that the information supplied with	this filing does not qualify for	the even	notion etai						formation		

receipt centry that the minimation supplied wing this hing does not quality for the exemption stated in Section 119.0/(3)(i), Florida Statutes. If 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 an other provided the composition 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 an other provided in the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation o

SIGNATURE: \_

Date Davtime Phone #

Affachment F19200000074

**DOCUMENT # N920000000074** 

3486 NORTH ROOSEVELT BOULEVARD CORPORATION

FEI NUMBER 65-0368637

11. ADDITIONS/CHANGES TO OFFIDERS AND DIRECTORS IN 10						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Neugent, George # 25 Ships Way Big Piné Key, Florida 33043	Change	<b>☑</b> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Padron, Robert P. O. Box 921 Key West, Florida 33040	☐ Change	<b>☑</b> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Slate, Amy 104250 Overseas Highway Key Largo, Florida 33037	- Change	Áddition			