

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N92000000074

1. Entity Name

3406 NORTH ROOSEVELT BOULEVARD CORPORATION

Principal Place of Business

1201 WHITE ST.
102
KEY WEST FL 33040-3328
US

Mailing Address

1201 WHITE ST.
102
KEY WEST FL 33040-3328
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

65-0368637

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

HUTTON, SUZANNE A.
502 WHITEHEAD ST.
COURTHOUSE ANNEX, 3RD FLOOR
KEY WEST FL 33040

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHEELER, ALEXA 85960 OVERSEAS HWY ISLAMORADA FL 33036	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, SALLY 401 SOUTH ST. KEY WEST FL 33040	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TAPOROWSKI, VINCE 1014 W. SHORE DR. BIG PINE KEY FL 33043	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WICKERS, WILLIAM 161 KEY HAVEN RD. KEY WEST FL 33040	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P INGRAM, MICHAEL 1118 FLEMING ST. KEY WEST FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEALL, RUSSELL 111 SAGUARO LANE MARATHON FL	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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:

Michael J. DeSautel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 22, 2001 8:00 am
Secretary of State

01-22-2001 90142 042 ****61.25

00006209



DO NOT WRITE IN THIS SPACE

0034671

CR2E037 (10/00)

Attachment
#N92000000074

DOCUMENT # N920000000074

DDW6209

3406 NORTH ROOSEVELT BOULEVARD CORPORATION

FEI NUMBER 65-0368637

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Neugent, George
STREET ADDRESS	# 25 Ships Way
CITY-ST-ZIP	Big Pine Key, Florida 33043
TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Padron, Robert
STREET ADDRESS	P. O. Box 921
CITY-ST-ZIP	Key West, Florida 33040
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Slate, Amy
STREET ADDRESS	104250 Overseas Highway
CITY-ST-ZIP	Key Largo, Florida 33037