


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000021954
 1. Entity Name
 1455 LANDS END ROAD CORP.



Principal Place of Business
 300 NORTH FEDERAL HIGHWAY
 LAKE WORTH, FL 33460

Mailing Address
 BROOKWOOD DRIVE
 CORAM, NY 11727



08292006 No Chg-P CR2E034 (11/05)

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4. FEI Number
 20-0930249

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SORGINI, ROBERT C ESQ.
 300 NORTH FEDERAL HIGHWAY
 LAKE WORTH, FL 33460

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

U00000575872
 09/01/06-80004-014 550.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FARRELL, JOSEPH G JR
STREET ADDRESS	2385 MAIN STREET, THE ATRIUM
CITY-ST-ZIP	BRIDGEHAMPTON, NY 11932
TITLE	P
NAME	AUERBACH, HARVEY
STREET ADDRESS	DUANE ROAD
CITY-ST-ZIP	BRIDGEHAMPTON, FL 11937
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ DATE: 8/29/06 DAYTIME PHONE # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR