


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90193 037 ****61.25

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



01052006 Chg-NP CR2E037 (11/05)

4. FEI Number 65-0368637		Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>		\$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. 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 reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FIRM, TODD B	NAME		NAME	McPherson, Morgan	NAME	
STREET ADDRESS	99696 OVERSEAS HWY UNIT #1	STREET ADDRESS		STREET ADDRESS	PO Box 1409	STREET ADDRESS	
CITY-ST-ZIP	KEY LARGO, FL 33037	CITY-ST-ZIP		CITY-ST-ZIP	KEY WEST, FL 33040	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCALES, EDWIN III	NAME		NAME	VP	NAME	
STREET ADDRESS	201 FRONT ST. SUITE 333	STREET ADDRESS		STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP	KEY WEST, FL 33040	CITY-ST-ZIP		CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINHOFER, CHRISTINA	NAME		NAME	D	NAME	
STREET ADDRESS	PO BOX 430652	STREET ADDRESS		STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP	BIG PINE KEY, FL 33043	CITY-ST-ZIP		CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BABICH, MATTHEW P CHA	NAME		NAME	P	NAME	
STREET ADDRESS	1319 DUBAL STREET	STREET ADDRESS		STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP	KEY WEST, FL 33040	CITY-ST-ZIP		CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	INGRAM, MICHAEL	NAME		NAME		NAME	
STREET ADDRESS	604 WHITE HEAD STREET	STREET ADDRESS		STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP	KEY WEST, FL 33040	CITY-ST-ZIP		CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HELBLING, JUNE	NAME		NAME		NAME	
STREET ADDRESS	PO BOX 522828	STREET ADDRESS		STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP	MARATHON SHORES, FL 33050	CITY-ST-ZIP		CITY-ST-ZIP		CITY-ST-ZIP	

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 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 Ingram* **1/6/06** **305 296 1552**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40001614

~~A NP2000000071~~

**3406 North Roosevelt Boulevard Corporation
1201 White Street, Suite 102
Key West, Florida 33040**

January 5, 2005

FEI No: 650368637

Title	T	change
Name	Padron, Robert	
Street Address	2601 S. Roosevelt Blvd.	
City-St-Zip	Key West, Florida 33040	

Title	D	addition
Name	McCoy, Charles	
Street Address	500 Whitehead Street	
City-St-Zip	Key West, Florida 33040	

Title	D	
Name	Simmons, Scott	
Street Address	84001 Overseas Highway	
City-St-Zip	Islamorada, Florida 33036	