


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90076 043 ****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 - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

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

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

7. Name and Address of New Registered Agent

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

Filing Fee is \$61.25 Due by May 1, 2007

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	FIRM, TODD B	
STREET ADDRESS	99696 OVERSEAS HWY UNIT #1	
CITY-ST-ZIP	KEY LARGO, FL 33037	
TITLE	T	<input type="checkbox"/> Delete
NAME	MCPHERSON, MORGAN	
STREET ADDRESS	PO BOX 1409	
CITY-ST-ZIP	KEY WEST, FL 33040	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WEINHOFER, CHRISTINA	
STREET ADDRESS	PO BOX 430652	
CITY-ST-ZIP	BIG PINE KEY, FL 33043	
TITLE	D	<input type="checkbox"/> Delete
NAME	BABICH, MATTHEW P CHA	
STREET ADDRESS	1319 DUBAL STREET	
CITY-ST-ZIP	KEY WEST, FL 33040	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	INGRAM, MICHAEL	
STREET ADDRESS	604 WHITE HEAD STREET	
CITY-ST-ZIP	KEY WEST, FL 33040	
TITLE	D	<input type="checkbox"/> Delete
NAME	HELBLING, JUNE	
STREET ADDRESS	PO BOX 522828	
CITY-ST-ZIP	MARATHON SHORES, FL 33050	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIMMONS, SCOTT	
STREET ADDRESS	84001 Overseas Hwy	
CITY-ST-ZIP	Islamorada, FL 33066	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: Todd B Firm Date: 1-30-07 Daytime Phone #: 305-451-1177

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

40009256



01032007 Chg-NP CR2E037 (12/06)

ATTACHMENT

40009232

~~#N920000000074~~

**3406 North Roosevelt Blvd. Corp.
1201 White Street, Suite 102
Key West, Florida 33040**

FEI No: 65-0368637

Document No: N92000000074

11.

Title	D
Name	Padron, Robert
Street Address	2601 S. Roosevelt Blvd
City-St-ZIP	Key West, Florida 33040

Title	D
Name	De Gennaro, Mario
Street Address	9400 Overseas Hwy., # 210
	Marathon Airport
City-St-ZIP	Marathon, Florida 33050

Title	T
Name	Wright, Douglas
Street Address	506 Fleming Street
City-St-ZIP	Key West, Florida 33040