

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000074

Entity Name: 3406 NORTH ROOSEVELT BOULEVARD CORPORATION**Current Principal Place of Business:**1201 WHITE ST.
102
KEY WEST, FL 33040-3328**Current Mailing Address:**1201 WHITE ST.
102
KEY WEST, FL 33040-3328 US**FEI Number:** 65-0368637**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LIMBERT, CHRISTINE
1111 12TH STREET
SUITE 408
KEY WEST, FL 33040 US*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:** CHRISTINE LIMBERT

02/03/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name IRWIN, RITA
Address 58901 OVERSEAS HIGHWAY
City-State-Zip: GRASSY FL 33050

Title OFFICER
Name TIPPETT, GAYLE
Address 29675 OVERSEAS HIGHWAY
City-State-Zip: BIG PINE KEY FL 33043

Title OFFICER
Name BERNARDIN, JAMES
Address 80401 OVERSEAS HIGHWAY
City-State-Zip: ISLAMORADA FL 33036

Title VC
Name FERNANDEZ, GEORGE L
Address 1316 DUVAL STREET
City-State-Zip: KEY WEST FL 33040

Title OFFICER
Name SHIPLEY, MICHAEL
Address 92530 OVERSEAS HIGHWAY
City-State-Zip: TAVERNIER FL 33070

Title TREASURER
Name ROOT, TIMOTHY
Address 1410 JOHNSON STREET
City-State-Zip: KEY WEST FL 33040

Title OFFICER
Name JOHNSON, TERI
Address 1300 WHITE STREET
City-State-Zip: KEY WEST FL 33040

Title CO-TREASURER
Name SCHMIDT, DIANE
Address 245 FRONT STREET
City-State-Zip: KEY WEST FL 33040

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RITA IRWIN

PRESIDENT

02/03/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	OFFICER
Name	COLDIRON, MICHELLE
Address	25 SHIPS WAY
City-State-Zip:	BIG PINE KEY FL 33043