

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 450708

1. Entity Name
FLORIDA BOARD OF TRADE, INC.



Principal Place of Business
**1010 SOUTH OCEAN BLVD.
APT. 803
POMPANO BEACH, FL 33662 US**

Mailing Address
**1010 SOUTH OCEAN BLVD.
APT. 803
POMPANO BEACH, FL 33662 US**

DO NOT WRITE IN THIS SPACE



01262006 No Chg-P CR2E034 (11/05)

4. FEE Number
59-1624009

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CALEVAS, HARRY P.
1010 S. OCEAN BLVD. APT. 803
POMPANO BEACH, FL 33062**

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CALEVAS, HARRY P.
STREET ADDRESS	1010 S. OCEAN BLVD.
CITY-ST-ZIP	POMPANO BEACH, FL
TITLE	S
NAME	PEELER, ETHEL
STREET ADDRESS	1010 S. OCEAN BLVD., APT. 803
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	T
NAME	WHITE, HEATHER
STREET ADDRESS	1010 S. OCEAN BLVD.
CITY-ST-ZIP	POMPANO BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/15/06-80026-011 150.00

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IN THIS SPACE**

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: Harry P. Calevas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-06

Date

954.782-2733

Daytime Phone #