

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 497707

FILED
Jan 03, 2006
Secretary of State

Entity Name: ROPES ASSOCIATES, INC.

Current Principal Place of Business:

333 N NEW RIVER DR E
STE. 1200
FT LAUDERDALE, FL 33301 US

Current Mailing Address:

333 N NEW RIVER DR E
STE. 1200
FT LAUDERDALE, FL 33301 US

New Principal Place of Business:

333 N NEW RIVER DR E
STE 3000
FT LAUDERDALE, FL 33301 US

New Mailing Address:

333 N NEW RIVER DR E
STE 3000
FT LAUDERDALE, FL 33301 US

FEI Number: 59-1656996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROPES, JOHN N
333 N. NEW RIVER DR. E.
SUITE 1200
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

ROPES, JOHN N
333 N. NEW RIVER DR. E.
SUITE 3000
FT. LAUDERDALE, FL 33301 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: JOHN ROPES

01/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROPES, JOHN N MR.
Address: 333 N. NEW RIVER DR. E.
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN ROPES

P

01/03/2006

Electronic Signature of Signing Officer or Director

Date