2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 06, 2006 8:00 am Secretary of State

1. Entity Nan	MENT # N0400000 NCH HOUSE RESEARCH			3h. 1	06-2006 90097		
Principal Place of Business 29 SHORELAND DRIVE KEY LARGO, FL 33037 Mailing Address 29 SHORELAND DRIVE KEY LARGO, FL 33037 KEY LARGO, FL 33037			-	1 1 1 1 1 1 1 1 1 1	Idin bahn bahn dalih dalih dalih	T	III/BY BI JXBY
2. Principal Place of Business		3. Mailing Address					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		01102006 Ch	g-NP CR	2E037 (11/05)	
City & State		City & State		4. FEI Number 20-0828816	6		oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of Sta		Fee Require	
	6. Name and Address of Curren	t Registered Agent	Name	7. Name and Addr	ess of New Registe	ered Agent	
REINER, DAVID P II 9100 SOUTH DADELAND BLVD.				Street Address (P.O. Box Number is Not Acceptable)			
SUITE 1408 MIAMI, FL 33156							
MIAMI, PL 33130			City		FL Zip Cod	e	
8. The above the obligat	e named entity submits this statement to tions of registered agent.	for the purpose of changing its re	egistered office or req	gistered agent, or both, in t	he State of Florida.	I am familiar with,	and accept
0.01.11							
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: R	Registered Agent signature re	required when reinstating)		DATE	
SIGNATURE		9. Election Camp Trust Fund Cor	paign Financing	\$5.00 May Be	Make o	check payable to	
10.	Signature, typed or printed name of registered ager Filling Fee is \$61.25 Due by May 1, 2006 OFFICERS AND D	9. Election Camp Trust Fund Cor	paign Financing	\$5.00 May Be	Make o Florida D	check payable to	tate
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND D P BLOCK, DAVID 29 SHORELAND DRIVE	9. Election Camp Trust Fund Cor	paign Financing Intribution. 11. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Make o Florida D	check payable to	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND D P BLOCK, DAVID	9. Election Camp Trust Fund Cor DIRECTORS	ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANGE	Make o Florida D	check payable to repartment of St RD DIRECTORS IN	tate 1 10 Addition
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND D P BLOCK, DAVID 29 SHORELAND DRIVE KEY LARGO, FL 33037	9. Election Camp Trust Fund Cor	arign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS Z STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANGE POCK, David 3 Shore land arrive	Make of Florida D	check payable to epartment of SI	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND D P BLOCK, DAVID 29 SHORELAND DRIVE KEY LARGO, FL 33037 VP BLACK, MICHAEL F 29 SHORELAND DRIVE	9. Election Camp Trust Fund Cor DIRECTORS	arign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS Z STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANGE	Make of Florida D	check payable to repartment of St RD DIRECTORS IN	tate 1 10 Addition
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND D P BLOCK, DAVID 29 SHORELAND DRIVE KEY LARGO, FL 33037 VP BLACK, MICHAEL F 29 SHORELAND DRIVE KEY LARGO, FL 33037 T RODGERS, CAROL L 29 SHORELAND DRIVE	9. Election Camp Trust Fund Cor Delete Delete	arign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANGE POCK, David 3 Shore land arrive	Make of Florida D	check payable to repartment of Si DIRECTORS IN Change	Addition Addition

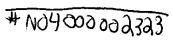
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/06 453.1313 Date Daytime Phone #

ATTACHMENT





40069615

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 19, 2006

THE CONCH HOUSE RESEARCH FOUNDATION, INC. 29 SHORELAND DRIVE KEY LARGO, FL 33037

SUBJECT: THE CONCH HOUSE RESEARCH FOUNDATION, INC.

Ref. Number: N04000002323

We have received your document for THE CONCH HOUSE RESEARCH FOUNDATION, INC. and check(s) totaling \$61.25. However, your check(s) and document are being returned for the following:

The annual report/reinstatement application must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Michelle Milligan Document Specialist Supervisor

Letter Number: 006A00003856