

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 21, 2008
Secretary of State

DOCUMENT# N92000000074

Entity Name: 3406 NORTH ROOSEVELT BOULEVARD CORPORATION**Current Principal Place of Business:**1201 WHITE ST.
102
KEY WEST, FL 330403328 US**New Principal Place of Business:****Current Mailing Address:**1201 WHITE ST.
102
KEY WEST, FL 330403328 US**New Mailing Address:****FEI Number:** 65-0368637**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HUTTON, SUZANNE A.
502 WHITEHEAD ST.
COURTHOUSE ANNEX, 3RD FLOOR
KEY WEST, FL 33040 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: FIRM, TODD B
Address: 99696 OVERSEAS HWY UNIT #1
City-St-Zip: KEY LARGO, FL 33037**Title:** D () Delete
Name: MCPHERSON, MORGAN
Address: PO BOX 1409
City-St-Zip: KEY WEST, FL 33040**Title:** P () Delete
Name: DIGENNERO, MARIO
Address: 9400 OVERSEAS HWY STE 210
City-St-Zip: MARATHON, FL 33050**Title:** D () Delete
Name: HERNANDEZ, LOU
Address: 1505 LAIRD ST.
City-St-Zip: KEY WEST, FL 33040**Title:** D () Delete
Name: MARZELLA, JAY
Address: 560 BARRY AVE
City-St-Zip: LITTLE TORCH KEY, FL 33042**Title:** VP () Delete
Name: RHYNE, JAMES
Address: 157 SAP ODILLA DR
City-St-Zip: LOWER MATECOMBE, FL 33036**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: REGO, FRANK
Address: P. O. BOX 2100
City-St-Zip: KEY LARGO, FL 33037

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIO DIGENNERO

P

11/21/2008

Electronic Signature of Signing Officer or Director

Date