## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000004692

Entity Name: SAMUEL'S HOUSE, INC.

FILED Apr 18, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1614 TRUESDELL CT KEY WEST, FL 33040

**Current Mailing Address: New Mailing Address:** 

1614 TRUESDELL CT KEY WEST, FL 33040

FEI Number: 65-0951120 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LETO, ELMIRA LETO, ELMIRA L 1614 TRUESDELL DT 1614 TRUESDELL DT KEY WEST, FL 33040 US US KEY WEST, FL 33040

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: ELMIRA L. LETO 04/18/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

TRES () Delete (X) Change ( ) Addition

CARBONELL, NOELIA CARBONELL, NOELIA Name: Name: 1118 17TH STREET Address: **1118 17TH STREET** Address: KEY WEST, FL 33040 City-St-Zip: City-St-Zip: KEY WEST, FL 33040

Title: Title: PRES ( ) Delete (X) Change ( ) Addition

Name: VALEST, GINA Name: BAZO, SANDI Address: 3920 S. ROOSEVELT BLVD Address: 214 SHORE AVENUE City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: () Delete Title: VP/S (X) Change ( ) Addition

RAMIREZ, SHARYN RAMIREZ, SHARYN Name: Name: Address: 2425 LINDA AVE Address: 2425 LINDA AVE City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: VΡ (X) Delete Title: () Change () Addition

BAZO, SANDI Name: Address: 8 SHORE AVENUE Address: City-St-Zip: KEY WEST, FL 33040 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELMIRA L. LETO DIR 04/18/2006