2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000090701

Entity Name: LONGBOAT KEY ENTERPRISES, INC.

FILED Mar 24, 2006 Secretary of State

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

5380 GULF OF MEXICO DRIVE 404 80TH ST

LONGBOAT KEY, FL 34228 HOLMES BEACH, FL 34217

Current Mailing Address: New Mailing Address:

5380 GULF OF MEXICO DRIVE 404 80TH ST

LONGBOAT KEY, FL 34228 HOLMES BEACH, FL 34217

FEI Number: 34-1999337 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MORROW, BOB BELL, JOHNATHAN

5380 GULF OF MEXICO DRIVE 404 80TH ST

LONGBOAT KEY, FL 34228 US HOLMES BEACH, FL 34217 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: JOHNATHAN BELL 03/24/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:BELL, JOHNATHANName:BELL, JOHNATHANAddress:5380 GULF OF MEXICO DRIVEAddress:404 80TH ST

City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip: HOLMES BEACH, FL 34217

Title: VP (X) Delete Title: () Change () Addition Name: MORROW. BOB Name:

Address: 5380 GULF OF MEXICO DRIVE Address: City-St-Zip: LONGBOAT KEY, FL 34228 City-St-Zip:

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

 Name:
 MORROW, TAMMY F
 Name:

 Address:
 5380 GULF OF MEXICO DRIVE
 Address:

 City-St-Zip:
 LONGBOAT KEY, FL 34228
 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: JOHNATHAN BELL PRES 03/24/2006