2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025276

Entity Name: 421 DOLPHIN PLAZA, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
421 MARY ESTHER BLVD MARY ESTHER, FL 32569	421 MARY ESTHER BOULEVARD MARY ESTHER, FL 32569

Current Mailing Address:	**New Mailing Address:**
9643 BONE BLUF DR NAVARRE, FL 32566	9643 BONE BLUF DRIVE NAVARRE, FL 32566

FEI Number: 20-2376962   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:**
HELMICH, KEVIN M 4481 LEGENDARY DR - STE 200 DESTIN, FL 32541 US	HELMICH, KEVIN M ESQUIRE 4481 LEGENDARY DRIVE SUITE 200 DESTIN, FL 32541 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: KEVIN M. HELMICH   02/03/2006

         Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D   ( ) Delete
Name: HARVELL, SHARON
Address: 9643 BONE BLUFF DRVD
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD   (X) Change ( ) Addition
Name: HARVELL, SHARON
Address: 9643 BONE BLUFF DRIVE
City-St-Zip: NAVARRE, FL 32566

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: SHARON HARVELL   PSTD   02/03/2006

         Electronic Signature of Signing Officer or Director   Date