

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 MAR 15 PM 12:16

DOCUMENT # P05000126447

1. Entity Name  
THE ORIGINAL SQUARE GROUPER, INC.



Principal Place of Business  
22518 LAFITTE DR.  
CUDJOE KEY, FL 33042

Mailing Address  
926 TRUMAN AVE.  
KEY WEST, FL 33040

2. Principal Place of Business  
22658 OVERSEAS HWY  
Suite, Apt. #, etc.

3. Mailing Address  
22658 OVERSEAS HWY  
Suite, Apt. #, etc.



03072006 Chg-P CR2E034 (11/05)

City & State  
CUDJOE KEY, FL  
Zip 33042 Country

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CUDJOE KEY, FL  
Zip 33042 Country

4. FEI Number  
20-3467301  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

KELLEY, ALBERT L  
926 TRUMAN AVE.  
KEY WEST, FL 33040

## 7. Name and Address of New Registered Agent

Name LYNN C BELL  
Street Address (P.O. Box Number is Not Acceptable)  
22658 OVERSEAS HWY  
City CUDJOE KEY FL Zip Code 33042

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Lynn C Bell  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE PD  
NAME GOODRICH, RICHARD ☐ Delete  
STREET ADDRESS 776 CARRIBEAN DR.  
CITY-ST-ZIP SUMMERLAND KEY, FL 33042

TITLE STD ☒ Delete  
NAME GOODRICH, MARILYN  
STREET ADDRESS 776 CARRIBEAN DR.  
CITY-ST-ZIP SUMMERLAND KEY, FL 33042

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition  
NAME BELL, LYNN C  
STREET ADDRESS 22658 OVERSEAS HWY  
CITY-ST-ZIP CUDJOE KEY, FL 33042

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 607, 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: Lynn C Bell  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #