

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003336

FILED
Feb 16, 2006
Secretary of State

Entity Name: FRENCH & PARRELLO ASSOCIATES, P.A.

Current Principal Place of Business:

1800 ROUTE 34
SUITE 101
WALL, NJ 07719

New Principal Place of Business:

Current Mailing Address:

1800 ROUTE 34
SUITE 101
WALL, NJ 07719

New Mailing Address:

FEI Number: 13-2800489 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, LANCE B
1109 EAST MARINE WAY UNIT L3R
OLD PORT COVE
NORTH PALM BEACH, FL 33408 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: FRENCH, LAURENCE E
Address: 2164 HIDDEN BROOK DRIVE
City-St-Zip: WALL, NJ 07719

Title: PCEO () Delete
Name: PARRELLO, ARGO T
Address: 61 CARNEGIE COURT
City-St-Zip: MIDDLETOWN, NJ 07748

Title: VP () Delete
Name: HELLER, JAMES B
Address: 24 BUENA VISTA AVENUE
City-St-Zip: FAIR HAVEN, NJ 07704

Title: VP () Delete
Name: EDWARDS, JOSEPH M
Address: 15 ALGONQIN TERRACE
City-St-Zip: ENGLISHTOWN, NJ

Title: VP () Delete
Name: WATKINS, SCOTT D
Address: 2418 ORCHARD CREST BLVD
City-St-Zip: MANASQUAN, NJ 08736

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:

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: SCOTT WATKINS

VP

02/16/2006

Electronic Signature of Signing Officer or Director

_____ Date