2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003336

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

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1800 ROU					
SUITE 101 WALL, NJ					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
1800 ROU SUITE 101 WALL, NJ	1				
FEI Number	: 13-2800489	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
OLD POR	T MARINE W. T COVE	AY UNIT L3R FL 33408 US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ().			
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FRENCH, LAU	BROOK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PCEO (PARRELLO, A 61 CARNEGIE MIDDLETOWI	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (HELLER, JAW 24 BUENA VIS FAIR HAVEN,	STA AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (EDWARDS, J 15 ALGONQIN ENGLISHTOV	ITERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WATKINS, SC	RD CREST BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 D. WATKINS VP 01/03/2007