


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # J30312
 1. Entity Name
 ANTHONY V. PUGLIESE, INC.



Principal Place of Business 101 PINEAPPLE GROVE WAY DELRAY BEACH, FL 33444 US	Mailing Address 101 PINEAPPLE GROVE WAY DELRAY BEACH, FL 33444 US
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DO NOT WRITE IN THIS SPACE



03152004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2742708	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRICKE, HENRY A ESQ
 101 PINEAPPLE GROVE WAY
 DELRAY BEACH, FL 33444

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000118183 04/19/04-80050-003 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PUGLIESE, ANTHONY V, III 101 PINEAPPLE GROVE WAY DELRAY BEACH, FL 33444
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PUGLIESE, LAURA K 101 PINEAPPLE GROVE WAY DELRAY BEACH, FL 33444
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRICKE, HENRY A 101 PINEAPPLE GROVE WAY DELRAY BEACH, FL 33444
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T REAMER, JOSEPH 101 PINEAPPLE GROVE WAY DELRAY BEACH, FL 33444
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Henry A. Fricke Henry A. Fricke 3-15-04 561-330-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #