2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J30312

Entity Name: ANTHONY V. PUGLIESE, INC.

FILED Apr 29, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

101 PINEAPPLE GROVE WAY 101 PUGLIESE'S WAY

DELRAY BEACH, FL 33444 US DELRAY BEACH, FL 33444 US

Current Mailing Address: New Mailing Address:

101 PINEAPPLE GROVE WAY 101 PUGLIESE'S WAY

DELRAY BEACH, FL 33444 US DELRAY BEACH, FL 33444 US

FEI Number: 59-2742708 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:

REAMER, JOSEPH
101 PINEAPPLE GROVE WAY
101 PUGLIESE'S WAY

DELRAY BEACH, FL 33444 US DELRAY BEACH, FL 33444 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: JOSEPH REAMER

JOSEPH REAMER 04/29/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition PUGLIESE, ANTHONY V., III Name: PUGLIESE, ANTHONY V., III Name: 101 PINEAPPLE GROVE WAY 101 PUGLIESE'S WAY Address: Address: City-St-Zip: DELRAY BEACH, FL 33444 City-St-Zip: DELRAY BEACH, FL 33444

Title: V () Delete Title: V (X) Change () Addition
Name: PUGLIESE, LAURA K Name: PUGLIESE, LAURA K

Address: 101 PINEAPPLE GROVE WAY Address: 101 PUGLIESE; LAURA K

City-St-Zip: DELRAY BEACH, FL 33444 City-St-Zip: DELRAY BEACH, FL 33444

Title: S (X) Delete Title: () Change () Addition

 Name:
 FRICKE, HENRY A
 Name:

 Address:
 101 PINEAPPLE GROVE WAY
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33444
 City-St-Zip:

Title: T () Delete Title: S/T (X) Change () Addition

Name:REAMER, JOSEPHName:REAMER, JOSEPHAddress:101 PINEAPPLE GROVE WAYAddress:101 PUGLIESE'S WAYCity-St-Zip:DELRAY BEACH, FL 33444City-St-Zip:DELRAY BEACH, FL 33444

I hereby certify that the information supplied with this filing does not qualify 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: ANTHONY V. PUGLIESE, III PRES 04/29/2007