

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062817

FILED  
Apr 01, 2005  
Secretary of State

Entity Name: FRANK D'ALESSANDRO EQUITY FUNDING, INC.

**Current Principal Place of Business:**

7800 UNIVERSITY POINTE DRIVE  
SUITE 100  
FT. MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

7800 UNIVERSITY POINTE DRIVE  
SUITE 100  
FT. MYERS, FL 33907

**New Mailing Address:**

FEI Number: 65-1116479      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GAUTHIER, ROSANNE G CEO  
7800 UNIVERSITY POINTE DRIVE  
SUITE 100  
FT. MYERS, FL 33907 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: ST ( ) Delete  
Name: D'ALESSANDRO, FRANK  
Address: 7800 UNIVERSITY POINTE DRIVE, SUITE 100  
City-St-Zip: FT. MYERS, FL 33907

Title: P ( ) Delete  
Name: GAUTHIER, ROSANNE G  
Address: 7800 UNIVERSITY POINTE DR., SUITE 100  
City-St-Zip: FT. MYERS, FL 33907

Title: CEO ( ) Delete  
Name: GAUTHIER, ROSANNE  
Address: 7800 UNIVERSITY POINTE DRIVE, SUITE 100  
City-St-Zip: FT. MYERS, FL 33907

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: VP ( ) Change (X) Addition  
Name: HATTING, MICHAEL E  
Address: 7800 UNIVERSITY POINTE DRIVE, SUITE 100  
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROSANNE GAUTHIER

P

04/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date