

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000091955

FILED
Feb 27, 2007
Secretary of State

Entity Name: QUATTRONE AND ASSOCIATES, INC.

Current Principal Place of Business:

11000 METRO PARKWAY
SUITE 30
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

11000 METRO PARKWAY
SUITE 30
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 72-1522004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUATTRONE, ALFRED
11000 METRO PARKWAY
SUITE 30
FORT MYERS, FL 33912 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: P,T () Delete
Name: QUATTRONE, ALFRED
Address: 12661 CHARTWELL DRIVE
City-St-Zip: FT MYERS, FL 33912

Title: VP,S () Delete
Name: QUATTRONE, LISA
Address: 12661 CHARTWELL DRIVE
City-St-Zip: FT MYERS, FL 33912

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: QUATTRONE, LISA
Address: 12661 CHARTWELL DRIVE
City-St-Zip: FT MYERS, FL 33912

Title: VP () Change (X) Addition
Name: DROVDLIC, FRED
Address: 11000 METRO PARKWAY STE 30
City-St-Zip: FORT MYERS, FL 33912

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: LISA QUATTRONE

S

02/27/2007

Electronic Signature of Signing Officer or Director

_____ Date