

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108486

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** JOHN S. GIAMBRONE ENTERPRISES, INC.

**Current Principal Place of Business:**

4195 QUAIL WOOD DRIVE  
SAINT CLOUD, FL 34772 US

**New Principal Place of Business:**

5350 LAKE LIZZIE DRIVE  
SAINT CLOUD, FL 34771 US

**Current Mailing Address:**

4195 QUAIL WOOD DRIVE  
SAINT CLOUD, FL 34772 US

**New Mailing Address:**

5350 LAKE LIZZIE DRIVE  
SAINT CLOUD, FL 34771 US

FEI Number: 65-1232261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GIAMBRONE, JOHN S  
4195 QUAIL WOOD DRIVE  
SAINT CLOUD, FL 34772 US

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

GIAMBRONE, JOHN S  
5350 LAKE LIZZIE DRIVE  
SAINT CLOUD, FL 34771 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/29/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GIAMBRONE, JOHN S  
Address: 4195 QUAIL WOOD DRIVE  
City-St-Zip: SAINT CLOUD, FL 34772

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: GIAMBRONE, JOHN S  
Address: 5350 LAKE LIZZIE DRIVE  
City-St-Zip: SAINT CLOUD, FL 34771

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: JOHN S GIAMBRONE

Electronic Signature of Signing Officer or Director

P

04/29/2005

Date