

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000090574

FILED
Feb 28, 2007
Secretary of State

Entity Name: DELLONE CONSTRUCTION, INC.

Current Principal Place of Business:

3042 ROUND TABLE LANE
NAPLES, FL 34112

New Principal Place of Business:

3042 ROUND TABLE LANE
NAPLES, FL 34112 US

Current Mailing Address:

3042 ROUND TABLE LANE
NAPLES, FL 34112

New Mailing Address:

3042 ROUND TABLE LANE
NAPLES, FL 34112 US

FEI Number: 56-2604098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELLONE, TED
3042 ROUND TABLE LANE
NAPLES, FL 34112 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: () Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: DELLONE, TED F OWNER
Address: 3042 ROUND TABLE LANE
City-St-Zip: NAPLES, FL 34112 US

Title: VPRES () Change (X) Addition
Name: DELLONE, URSULA A VPRES
Address: 3042 ROUND TABLE LANE
City-St-Zip: NAPLES, FL 34112 US

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: TED DELLONE

PRES

02/28/2007

Electronic Signature of Signing Officer or Director

Date