

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17097

FILED
Apr 22, 2008
Secretary of State

Entity Name: A.C. DELLOVADE, INC.

Current Principal Place of Business:

108 CAVASINA DRIVE
CANONSBURG, PA 15317 US

New Principal Place of Business:

Current Mailing Address:

108 CAVASINA DRIVE
CANONSBURG, PA 15317 US

New Mailing Address:

FEI Number: 25-1242514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: PTD () Delete
Name: DELLOVADE, ARMAND C
Address: R.D. 2
City-St-Zip: CANNONSBURG, PA

Title: SD () Delete
Name: DELLOVADE, PETER J
Address: 190 ROSCOMMON PLACE
City-St-Zip: MCMURRAY, PA

Title: V () Delete
Name: DELLOVADE, DENNIS
Address: 439 ROBINSHOOD LANE
City-St-Zip: MCMURRAY, PA

Title: V () Delete
Name: RILEY, PATRICK L
Address: 2 ASPEN DRIVE
City-St-Zip: WASHINGTON, PA 15301

Title: D () Delete
Name: FERRIS, RICHARD
Address: 1150 OLD POND ROAD
City-St-Zip: BRIDGEVILLE, PA 15017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: DELLOVADE, ARMAND C
Address: 906 BAKER ROAD
City-St-Zip: CANONSBURG, PA 15317

Title: SD (X) Change () Addition
Name: DELLOVADE, PETER J
Address: 190 ROSCOMMON PLACE
City-St-Zip: MCMURRAY, PA 15317

Title: V (X) Change () Addition
Name: DELLOVADE, DENNIS
Address: 439 ROBINSHOOD LANE
City-St-Zip: MCMURRAY, PA 15317

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

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

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: PATRICK L RILEY

Electronic Signature of Signing Officer or Director

V

04/22/2008

Date