2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000021038

1. Entity Name RICHARD DELL'OLIO, INC.



FILED Apr 16, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

9776 SAN JOSE BOULEVARD

SUITE 5 JACKSONVILLE, FL 32257 US .

9776 SAN JOSE BOULEVARD

SUITE 5

JACKSONVILLE, FL 32257 US



01082008 DO NOT WRITE IN THIS SPACE

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3170904 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name a	nd Address	of Current	Registered	Agent

DELL'OLIO, RICHARD 9776 SAN JOSE BLVD. #5

DO NOT WRITE

JACKSON	VILLE, FL 32257		IN THIS SPACE			
	named entity submits this statement for the prions of registered agent.	urpose of changing its register	l ed office or re	egistered agent, or bo	th, in the State of Florida. I am familia	r with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable (NOTE, Registere	d Agent signeture	required when reinstating)	DATE	
FILE NOWI!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Trust Fund Contrib			ncing	\$5.00 May Be Added to Fees	1100000901556	
10.	OFFICERS AND DIREC	FOR\$		<u> </u>	04/29/08-80073-018 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DELL'OLIO, RICHARD 5645 KEATON LAKE DR JACKSONVILLE, FL 32258				3.1.251.35 33313 313	in the section
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	<i>;</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CFTY-ST-ZIP						
TITLE	-					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

NAME STREET ADDRESS

Daytime Phone #