

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000050831

FILED
Jan 09, 2007
Secretary of State

Entity Name: GUALARIO, LICHT, ANDREW & GALATI, P.A.

Current Principal Place of Business:

7400 TAMIAMI TRAIL, NORTH
SUITE 101
NAPLES, FL 34108 US

New Principal Place of Business:

7400 TAMIAMI TRAIL N.
SUITE 101
NAPLES, FL 34108 US

Current Mailing Address:

7400 TAMIAMI TRAIL, NORTH
SUITE 101
NAPLES, FL 34108 US

New Mailing Address:

7400 TAMIAMI TRAIL N.
SUITE 101
NAPLES, FL 34108 US

FEI Number: 65-0421286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUALARIO, ANTHONY J
551 NEAPOLITAN LANE
NAPLES, FL 33940 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: PS () Delete
Name: GUALARIO, ANTHONY J
Address: 551 NEAPOLITAN LANE
City-St-Zip: NAPLES, FL 33940

Title: VT () Delete
Name: LICHT, MICHAEL A
Address: 7573 CORDOBA CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: S () Delete
Name: ANDREWS, PATRICIA
Address: P.O. BOX 1301
City-St-Zip: NAPLES, FL 34106

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: ANDREWS, PATRICIA
Address: 5455 TAMARIND RIDGE DR
City-St-Zip: NAPLES, FL 34119

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: ANTHONY J. GUALARIO

PS

01/09/2007

Electronic Signature of Signing Officer or Director

_____ Date