2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000049517

Entity Name: NACHO MAMA'S OF COLLIER COUNTY, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
599 S COLLIER BLVD MARCO ISLAND, FL 34145 US	599 S COLLIER BLVD 201 MARCO ISLAND, FL 34145 US

Current Mailing Address:	**New Mailing Address:**
599 S COLLIER BLVD MARCO ISLAND, FL 34145 US	599 S COLLIER BLVD 201 MARCO ISLAND, FL 34145 US

FEI Number: FEI Number Applied For ( )   FEI Number Not Applicable (X)   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
RAINONE, ANTHONY D 795 WILLOW CT MARCO ISLAND, FL 34145 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   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D ( ) Delete Name: RAINONE, ANTHONY D Address: 795 WILLOW CT City-St-Zip: MARCO ISLAND, FL 33937	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: VP ( ) Delete Name: PHILLIPS, ERIC Address: 1878 DOGWOOD DR City-St-Zip: MARCO ISLAND, FL 34145	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: ST ( ) Delete Name: RAINONE, JAMES D Address: 24 CONANICUS RD City-St-Zip: NARAGANSETT, RI 02882	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:

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: ERIC PHILLIPS   V.P.   04/20/2007

          Electronic Signature of Signing Officer or Director   Date