

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000049517

FILED  
Apr 10, 2006  
Secretary of State

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

**Current Principal Place of Business:**

599 S COLLIER BLVD  
MARCO ISLAND, FL 34145 US

**New Principal Place of Business:**

**Current Mailing Address:**

599 S COLLIER BLVD  
MARCO ISLAND, FL 34145 US

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

RAINONE, ANTHONY D  
795 WILLOW CT  
MARCO ISLAND, FL 34145 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: D ( ) Delete  
Name: RAINONE, ANTHONY D  
Address: 795 WILLOW CT  
City-St-Zip: MARCO ISLAND, FL 33937

Title: VP ( ) Delete  
Name: PHILLIPS, ERIC  
Address: 92 MARCO VILLA DR  
City-St-Zip: MARCO ISLAND, FL 34145

Title: ST ( ) Delete  
Name: RAINOVE, JAMES D  
Address: 24 CONANICUS RD  
City-St-Zip: NARAGANSETT, RI 02882

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: PHILLIPS, ERIC  
Address: 1878 DOGWOOD DR  
City-St-Zip: MARCO ISLAND, FL 34145

Title: ST (X) Change ( ) Addition  
Name: RAINONE, JAMES D  
Address: 24 CONANICUS RD  
City-St-Zip: NARAGANSETT, RI 02882

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

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

OWNE

04/10/2006

\_\_\_\_\_  
Date