

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000089729

**Entity Name:** COLELLA & ASSOCIATES, INC.

**Current Principal Place of Business:**

805 SMOKERISE BLVD  
PORT ORANGE, FL 32127

**Current Mailing Address:**

805 SMOKERISE BLVD  
PORT ORANGE, FL 32127 US

**FEI Number:** 59-3345806

**Certificate of Status Desired:** Yes

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

JAMES C. COLELLA  
805 SMOKERISE BLVD.  
PORT ORANGE, FL 32127 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

**Officer/Director Detail :**

Title           PTD  
Name           COLELLA, JAMES C  
Address        805 SMOKERISE BOULEVARD  
City-State-Zip: PORT ORANGE FL 32127

Title           VSD  
Name           COLELLA, BEVERLY J  
Address        805 SMOKERISE BOULEVARD  
City-State-Zip: PORT ORANGE FL 32127

*I hereby 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 all other like empowered.*

**SIGNATURE:** JAMES C. COLELLA

**PRESIDENT**

**04/20/2014**

Electronic Signature of Signing Officer/Director Detail

Date