2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# 273393

Entity Name: MICHELONI PROPERTIES INC

Current Principal Place of Business:

1143 S. KANSAS AVE.
GROVELAND, FL 34736

New Principal Place of Business:

Current Mailing Address:

1143 SOUTH KANSAS AVE.
GROVELAND, FL 34736 US

New Mailing Address:

FEI Number: 59-1030175 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GERACI, JANE
1143 S. KANSAS AVE.
GROVELAND, FL 34736 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: PD ( ) Delete
Name: GERACI, JANE
Address: 1143 S. KANSAS AVE
City-St-Zip: GROVELAND, FL 34736

Title: VD ( ) Delete
Name: GERACI, RUDY
Address: 1143 S KANSAS AVE
City-St-Zip: GROVELAND, FL

Title: SD ( ) Delete
Name: GERACI, MICHELE
Address: 9940 CHERRY HILLS AVE CIR
City-St-Zip: BRADENTON, FL 34202

Title: TD ( ) Delete
Name: GERACI, ANITA
Address: 1114 S MAIN AVE
City-St-Zip: GROVELAND, FL 34736

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: GERACI, RUDY
Address: 1143 S KANSAS AVE
City-St-Zip: GROVELAND, FL 34736

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JANE GERACI PD 02/25/2009

Electronic Signature of Signing Officer or Director — Date