

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 342998

Entity Name: RUSS GORGONE, INC.

FILED
Jul 22, 2006
Secretary of State

Current Principal Place of Business:

6345 MORGAN LA FEE LANE
FT MYERS, FL 33912

New Principal Place of Business:

8192 COLLEGE PARKWAY
#B-34
FT MYERS, FL 33919 US

Current Mailing Address:

6345 MORGAN LA FEE LANE
FT MYERS, FL 33912

New Mailing Address:

FEI Number: 59-1236884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORGONE, LORRAINE
6345 MORGAN LA FEE LANE
FT MYERS, FL 33912 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GORGONE, LORRANE
Address: 6345 MORGAN LA FEE LANE
City-St-Zip: FT. MYERS, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GORGONE, LORRANE
Address: 6345 MORGAN LA FEE LANE
City-St-Zip: FT. MYERS, FL 33912 US

Title: SEC () Change (X) Addition
Name: GORGONE, RUSSELL
Address: 6345 MORGAN LA FEE LANE
City-St-Zip: FT. MYERS, FL 33912 US

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: LORRAINE M GORGONE

PD

07/22/2006

Electronic Signature of Signing Officer or Director

Date