

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 475231

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Entity Name:** BARRETTA AND ASSOCIATES, INC.

**Current Principal Place of Business:**

209 N SEACREST BLVD  
#1  
BOYNTON BEACH, FL 33435 US

**New Principal Place of Business:**

639 EAST OCEAN AVENUE  
STE 107  
BOYNTON BEACH, FL 33435 US

**Current Mailing Address:**

209 N SEACREST BLVD  
#1  
BOYNTON BEACH, FL 33435 US

**New Mailing Address:**

639 EAST OCEAN AVENUE  
STE 107  
BOYNTON BEACH, FL 33435 US

**FEI Number:** 59-1612081

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARRETTA, JAMES T  
74 BAYTREE LANE  
BOYNTON BEACH, FL 33436 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: PRES ( ) Delete  
Name: BARRETTA, JAMES T  
Address: 74 BAYTREE LANE  
City-St-Zip: BOYNTON BEACH, FL 33436

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

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: JAMES T. BARRETTA

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date