

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 502527

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: LOMBARDO, FOLEY & KOLARIK, INC.

## Current Principal Place of Business:

825 4TH STREET WEST  
BOX 188  
PALMETTO, FL 342200188 US

## New Principal Place of Business:

## Current Mailing Address:

825 4TH STREET WEST  
BOX 188  
PALMETTO, FL 342200188 US

## New Mailing Address:

FEI Number: 59-1669176

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOMBARDO, ROBERT J.  
825 4TH STREET WEST  
PALMETTO, FL 34221 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: PDT ( ) Delete  
Name: LOMBARDO, ROBERT J.,  
Address: 316 81ST. ST. WEST  
City-St-Zip: BRADENTON, FL

Title: V ( ) Delete  
Name: SKIPPER, JAN L  
Address: 4460 COCANUT AVE.  
City-St-Zip: SARASOTA, FL 34234

Title: VDS ( ) Delete  
Name: FOLEY, JOHN R  
Address: 2001 RIVERVIEW BLVD.  
City-St-Zip: BRADENTON, FL

Title: V ( ) Delete  
Name: KOLARIK, KENNETH C  
Address: 816 36TH ST W  
City-St-Zip: BRADENTON, FL 34205

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change ( ) Addition  
Name: LOMBARDO, ROBERT J.,  
Address: 316 81ST ST. WEST  
City-St-Zip: BRADENTON, FL

Title: V (X) Change ( ) Addition  
Name: SKIPPER, JAN L  
Address: 4460 COCONUT AVE.  
City-St-Zip: SARASOTA, FL 34234

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 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: ROBERT J. LOMBARDO

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04/28/2006

Electronic Signature of Signing Officer or Director

Date