2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 502527

Entity Name: LOMBARDO, FOLEY & KOLARIK, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
825 4TH STREET WEST BOX 188 PALMETTO, FL 342200188 US			825 4TH STREET WE PALMETTO, FL 3422	
Current Mailing Address:			New Mailing Address:	
825 4TH STREET WEST BOX 188 PALMETTO, FL 342200188 US			BOX 188 PALMETTO, FL 342200188 US	
FEI Number	: 59-1669176	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
825 4TH S PALMETT The above	DO, ROBERT OF TREET WEST OF FL 34221 OF TREET WEST OF TREET WEST OF TREET OF TREET.	US	purpose of changing its registere	d office or registered agent, or both,
SIGNATU	RF.			
Electronic Signature of Registered Age			ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PDT (LOMBARDO, F 316 81ST ST. N BRADENTON,	WEST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V (X SKIPPER, JAN 4460 COCONL SARASOTA, FI	T AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VDS (FOLEY, JOHN 2001 RIVERVII BRADENTON,	EW BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	V () Delete	Title:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT J. LOMBARDO PRES 04/29/2008

KOLARIK, KENNETH C

BRADENTON, FL 34205

816 36TH ST W

Name:

Address:

City-St-Zip: