

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 614362

FILED
Feb 16, 2007
Secretary of State

Entity Name: VECELLIO CONTRACTING CORP.

Current Principal Place of Business:

101 SANSBURY'S WAY
PO BOX 15065
W PALM BCH, FL 334113670

New Principal Place of Business:

101 SANSBURY'S WAY
W PALM BCH, FL 334113670

Current Mailing Address:

101 SANSBURY'S WAY
PO BOX 15065
W PALM BCH, FL 334113670

New Mailing Address:

FEI Number: 55-0593814 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEFREHN, JOHN A.
101 SANSBURY'S WAY
WEST PALM BEACH, FL 33416 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: D () Delete
Name: SLADE, MICHAEL
Address: 149 SCARBOROUGH TERRACE
City-St-Zip: WELLINGTON, FL

Title: ST () Delete
Name: DEFREHN, JOHN A.
Address: 6500 N. MILITARY TRAIL 3 14
City-St-Zip: WEST PALM BEACH, FL 33407

Title: AST () Delete
Name: GWINN, L. L.,
Address: MABSCOTT HILL ROAD
City-St-Zip: BECKLEY, WV

Title: VP () Delete
Name: VECELLIO, CHRISTOPHE, R S.
Address: 217 VIA LINDA
City-St-Zip: PALM BEACH, FL 33480

Title: PD () Delete
Name: VECELLIO, LEO JR.,
Address: 210 VIA DEL MAR
City-St-Zip: PALM BEACH, FL 33480

Title: VPD () Delete
Name: BASHAW, DAVID H
Address: 201 RIDGE ROAD
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: VECELLIO, MICHAEL
Address: 232 WEST INDIES DRIVE
City-St-Zip: PALM BEACH, FL 33480

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

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

Title: VP (X) Change () Addition
Name: VECELLIO, CHRISTOPHE, R S.
Address: 742 SLOPE TRAIL
City-St-Zip: PALM BEACH, FL 33480

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: JOHN A DEFREHN

ST

02/16/2007

Electronic Signature of Signing Officer or Director

Date