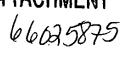
## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Aug 17, 2005 8:00 am Secretary of State 07-25-2005 90102 015 \*\*\*150.00

1. Entity Name	9	# 033503 ELLA REALTY, IN	IC.										
Principal Place of Business         Mailing Address           1120 SO. DALE MABRY         1120 SO. DALE MABRY           SUITE 201         SUITE 201           TAMPA, FL 33629-5007         TAMPA, FL 33629-5007								A CRAWIN MEN	A (1788 1981 Arres Ave	0258	81211 <del>212</del> 11 8	1 <b>8</b> 12 (1817)	
2. Principal Pl	ace of Busin	ess	3.	Mailing Address									
Suite, Apt. #, etc.				Suite, Apr. #, etc.			_	07122005	Chg-P	CR2	E034 (10	/03)	
City & State			City & State					4. FEI Numb			F		olied For Applicable
Zip		Country	1	Zip	Coun	ilry		5. Certificate	ol Status Desire	d []	\$8.75 Fee Ro		
	6. Name	and Address of Current	Regis	tered Agent		Name		7. Name and	Address of Ne	w Registere	d Agent	_	
CANNELL	A, JOSEP	H V.											
1220 SO. DALE MABRY SUITE 201						Street Address (P.O. Box Number is Not Acceptable)							
TAMPA, FI													
						City				F	L Zig	Code	) 
	iode of lebia	y submits this statement fittered agent.  or profile name of requestions over	2 2000	nella	-	PRESI	VE	-	th, in the State o	_	81_	with, a 	and accept
1		: FEE IS \$150.00 otember 7, 2005		9. Election Campa Trust Fund Cont				.00 May Be led to Fees	In accordant				
10.		OFFICERS AND	DIRE		11.			ADDITIONS	CHANGES TO	OFFICERS A			
TITLE	P CANNELI	LA, JOSEPH V		☐ Delete	TITL							ange	☐ Addilion
STREET ADORESS CITY-ST-ZIP		ALE MABRY #201				EET ADDRESS '- ST-ZIP							
TITLE	ST			☐ Celste	ım							ange	☐ Addition
NAME STREET ADDRESS	1220 S D	LA, GEMMA B ALE MABRY #201				SET ADDRESS							
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NAME	İ				HAA	AE							
STREET ADDRESS CITY-ST-ZIP	]			٠		EET ADDRESS			-	•			
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NAME					KA.	Æ						- •	
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TITLE	ļ			€ Delete	TITL	<del></del>					o	sube	Addition
NAME STREET ADDRESS CITY-ST-ZIP						AE EET ADORESS Y-ST-ZIP							
indicated of the co	d on this repr reporation or	ne information supplied wi ort or supplemental report the receiver or trustee em tachment with an address	is true powere	and accurate and that of to execute this report	my signs Las requ	ature shall hav	re the	same legal effé	ct as it made un es; and that my i	der oath; tha name appea	tiam an i	Ollice:	Or director
SIGNAT	FURE:	Soupl /	//	Paunell	1				7-28-	-05			· · · · ·



FLORIDA DEPARTMENT OF STATETACHMENT Secretary of State Glenda E. Hood DIVISION OF CORPORATIONS P.O. Box 6327 Tallahassee, Florida 32314



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## NOTICE OF INTENT TO DISSOLVE

0178577 OT AV 0.176 --- AUTO T2 2 1200 23023-600720 hillerellestheralellelastelellessellasteralestellassellel JOSEPH V. CANNELLA REALTY, INC. 1120 SQ. DALE MASRY SUITE 201 TAMPA FL 33629

## OPTION 3 - Receive a form by mail - Allow up to 28 days total processing time.

- · Detach this postcard.
- Enter address to mail report to, if <u>different</u> from preprinted address.
- Affix postage on reverse side and mail.

Document #

JOSEPH V. CAMMELLA REALTY, INC. 1120 SO. DALE MABRY SUITE 201 TAMPA FL 20029-5007

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