2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# F03000004431

Entity Name: VINCENT CIULLA DESIGN ASSOCIATES, INC.

Current Principal Place of Business:

1269 FIRST STREET, NO 5
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1269 FIRST STREET, NO. 5
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 13-2775765 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CIULLA, VINCENT
1269 FIRST STREET, NO. 5
SARASOTA, FL 34236 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: DCP ( ) Delete
Name: CIULLA, VINCENT
Address: 1907 OLEANDER STREET
City-St-Zip: SARASOTA, FL 34239

Title: VCVP ( ) Delete
Name: CIULLA, JULIE
Address: 1907 OLEANDER STREET
City-St-Zip: SARASOTA, FL 34239

Title: DST ( ) Delete
Name: CIULLA, JULIE
Address: 1907 OLEANDER STREET
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP (X) Change ( ) Addition
Name: CIULLA, VINCENT
Address: 1300 WESTWAY DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: VCVP (X) Change ( ) Addition
Name: CIULLA, JULIE
Address: 1300 WESTWAY DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: DST (X) Change ( ) Addition
Name: CIULLA, JULIE
Address: 1300 WESTWAY DRIVE
City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JULIE CIULLA VCVP 04/26/2005

Electronic Signature of Signing Officer or Director — Date