

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006708

Entity Name: THE FEDELI GROUP, INC.

FILED
Feb 03, 2006
Secretary of State

Current Principal Place of Business:

5005 ROCKSIDE RD., #500
INDEPENDENCE, OH 44131

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2079
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 34-1310398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VISCONSI, THOMAS A JR.
107 VILLA CIRCLE
ATLANTIS, FL 33462 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: CP () Delete
Name: FEDELI, UMBERTO P
Address: 5005 ROCKSIDE RD., #500
City-St-Zip: INDEPENDENCE, OH 44131

Title: S () Delete
Name: LONGO, RICK
Address: 5005 ROCKSIDE RD, #500
City-St-Zip: INDEPENDENCE, OH 44131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: VISCONSI, THOMAS A JR
Address: 5005 ROCKSIDE RD, #500
City-St-Zip: INDEPENDENCE, OH 44131

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: THOMAS A VISCONSI JR

S

02/03/2006

Electronic Signature of Signing Officer or Director

Date