

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G35167

FILED
Apr 21, 2005
Secretary of State

Entity Name: CIMINELLI DEVELOPMENT COMPANY OF FLORIDA, INC.

Current Principal Place of Business:

CENTERPOINTE CORPORATE PARK
350 ESSJAY ROAD, SUITE 101
WILLIAMSVILLE, NY 14221 US

New Principal Place of Business:

Current Mailing Address:

CENTERPOINTE CORPORATE PARK
350 ESSJAY ROAD, SUITE 101
WILLIAMSVILLE, NY 14221 US

New Mailing Address:

FEI Number: 16-1235611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI, FL 331560000 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: PD () Delete
Name: CIMINELLI, FRANK L.,
Address: 350 ESSJAY RD. #101
City-St-Zip: WILLIAMSVILLE, NY 14421

Title: V () Delete
Name: STARK, WILLIAM B JR,
Address: 350 ESSJAY RD. #101
City-St-Zip: WILLIAMSVILLE, NY 14421

Title: ST () Delete
Name: CIMINELLI, PAUL F,
Address: 350 ESSJAY RD #101
City-St-Zip: WILLIAMSVILLE, NY 14421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: FRANK L. CIMINELLI

PD

04/21/2005

Electronic Signature of Signing Officer or Director

Date