

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H75057

Entity Name: TALICO, INC.

FILED
Apr 08, 2004
Secretary of State

Current Principal Place of Business:

4304 BLUE HERON DR.
PONTE VEDRA, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3658
PONTE VEDRA BEACH, FL 320043658 US

New Mailing Address:

FEI Number: 59-2582975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAGLIAFERRI, LOUIS E.
4304 BLUE HERON DR.
PONTE VEDRA BEACH, FL 32802 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: TAGLIAFERRI, LOUIS E. .
Address: 4304 BLUE HERON DR.
City-St-Zip: PONTE VEDRA BEACH, FL

Title: DP () Delete
Name: TAGLIAFERRI, JUDITH, B.
Address: 4304 BLUE HERON DR.
City-St-Zip: PONTE VEDRA BEACH, FL

Title: DVP () Delete
Name: TAGLIAFERRI, DAVID L
Address: 12166 BIGGLY CT.
City-St-Zip: JACKSONVILLE, FL 32244

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: LOUIS E. TAGLIAFERRI

MGR

04/08/2004

Electronic Signature of Signing Officer or Director

Date