

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J00959

Entity Name: GILIBERTI, INC.

FILED  
Apr 23, 2012  
Secretary of State

**Current Principal Place of Business:**

20614 S.W. CITRUS BLVD.,  
INDIANTOWN, FL 34956

**New Principal Place of Business:**

**Current Mailing Address:**

20614 S.W. CITRUS BLVD., #11  
INDIANTOWN, FL 34956

**New Mailing Address:**

20614 S.W. CITRUS BLVD.,  
INDIANTOWN, FL 34956

FEI Number: 59-2657223

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GILIBERTI, JOHN F. SR.  
16357 S.W. INDIANWOOD CIRCLE  
INDIANTOWN, FL 34956 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

**OFFICERS AND DIRECTORS:**

Title: PDS  
Name: GILIBERTI, JOHN F SR.  
Address: 16357 S.W. INDIANWOOD CIRCLE  
City-St-Zip: INDIANTOWN, FL 34956

Title: VPDT  
Name: GILIBERTI, JOHN F JR.  
Address: 215 CORAL CAY TERRACE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby 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 all other like empowered.

SIGNATURE: JOHN GILIBERTI SR.

PDS

04/23/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date