

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J55244

FILED
May 02, 2007
Secretary of State

Entity Name: PELLONI/PASCO CORPORATION

Current Principal Place of Business:

1515 INTERNATIONAL PKWY
STE 3001
HEATHROW, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

1515 INTERNATIONAL PKWY
STE 3001
HEATHROW, FL 32746 US

New Mailing Address:

FEI Number: 59-2775444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELLONI, JAMES E.
300 S SPAUDLING COVE
HEATHROW, FL 32746 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PELLONI, JAMES E.,
Address: 1515 INTERNATIONAL PKWY SUITE 3001
City-St-Zip: LAKE MARY, FL 32746

Title: VP () Delete
Name: PELLONI, BARTON
Address: 1515 INTERNATIONAL PKWY SUITE 3001
City-St-Zip: LAKE MARY, FL 32746

Title: VP () Delete
Name: PELLONI, JUSTIN
Address: 1515 INTERNATIONAL PKWY SUITE 3001
City-St-Zip: LAKE MARY, FL 32746

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 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: LISSETTE COLON

ACCT

05/02/2007

Electronic Signature of Signing Officer or Director

_____ Date