2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K94034

Entity Name: FRANK D'ALESSANDRO, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Gurrent Frincipal Flace of Business.	New Fillicipal Flace of Busiless.

14220 ROYAL HARBOUR CT #510

FORT MYERS, FL 33908 US

Current Mailing Address: New Mailing Address:

14220 ROYAL HARBOUR CT #510

FORT MYERS, FL 33908 US

FEI Number: 65-0129669 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

D'ALESSANDRO, FRANK R 14220 ROYAL HARBOUR CT #510

FORT MYERS, FL 33908 US

PATRONE, ANDRE J 12685 NEW BRITTANY BLVD. FORT MYERS, FL 33907 US

PSTD

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: ANDRE J. PATRONE 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: V () Delete Title:
Name: D'ALESSANDRO, FRANK Name:

Name:D'ALESSANDRO, FRANKName:BAILLARGEON, JANAddress:14220 ROYAL HARBOUR CTAddress:14220 ROYAL HARBOUR CT, #510City-St-Zip:FORT MYERS, FL 33908City-St-Zip:FORT MYERS, FL 33908

Oky-3t-2ip. 1 OKT WITEKS, 1 E 33900

Title: PS (X) Delete Title: () Change () Addition Name: GALBRAITH. SUSAN M Name:

 Name:
 GALBRAITH, SUSAN M
 Name:

 Address:
 7051 CYPRESS TERRACE #110
 Address:

 City-St-Zip:
 FORT MYERS, FL 33907
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 SAND, LOU B
 Name:

 Address:
 7051 CYPRESS TERRACE, SUITE 110
 Address:

 City-St-Zip:
 FORT MYERS, FL 33907
 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: JAN BAILLARGEON P 04/30/2008