

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L28027

FILED
Jan 11, 2005
Secretary of State

Entity Name: SCOTT NICOLETTI HOMES, INC.

Current Principal Place of Business:

13355 SPRINGHILL DR
SPRING HILL, FL 34609 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 3211
SPRING HILL, FL 346113211 US

New Mailing Address:

FEI Number: 65-0155223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT NICOLETTI
13355 SPRINGHILL DRIVE
SPRING HILL, FL 34609 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: DPVT () Delete
Name: NICOLETTI, SCOTT,
Address: 3212 GULFVIEW DRIVE
City-St-Zip: SPRINGHILL, FL 34607

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVT (X) Change () Addition
Name: NICOLETTI, SCOTT,
Address: 3212 GULFVIEW DRIVE
City-St-Zip: HERNANDO BEACH, FL 34607

Title: S () Change (X) Addition
Name: NICOLETTI, CATHERINE
Address: 3212 GULFVIEW DRIVE
City-St-Zip: HERNANDO BEACH, FL 34607

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: SCOTT NICOLETTI

DPVT

01/11/2005

Electronic Signature of Signing Officer or Director

Date