

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L85070

Entity Name: CALI & ASSOCIATES, INC.

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

5056 TEAK WOOD DR.
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7213
NAPLES, FL 34101

New Mailing Address:

FEI Number: 65-0211006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALI, JOSEPH
5429 GUADELOUPE WAY
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

NANCY A. MCGINNIS
5056 TEAK WOOD DR.
NAPLES, FL 34119 US

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: NANCY A. MCGINNIS

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CALI, JOSEPH,
Address: 5429 GUADELOUPE WAY
City-St-Zip: NAPLES, FL 34119

Title: D () Delete
Name: MCGINNIS, NANCY
Address: 5056 TEAK WOOD DR
City-St-Zip: NAPLES, FL 34119 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: MCGINNIS, NANCY
Address: 5056 TEAK WOOD DR
City-St-Zip: NAPLES, FL 34119 US

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: NANCY A. MCGINNIS

VPD

04/25/2008

Electronic Signature of Signing Officer or Director

Date