

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010882

Entity Name: FRANK CIARAMELLA, INC.

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

3110 W 45TH ST #D
WEST PALM BEACH, FL 33427

New Principal Place of Business:

3110 W 45TH ST
SUITE D
WEST PALM BEACH, FL 33407

Current Mailing Address:

6168 WINDING LAKE DR
JUPITER, FL 33458

New Mailing Address:

FEI Number: 65-1049354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIARAMELLA, FRANK
3110 W 45TH ST #D
WEST PALM BEACH, FL 33427 US

Name and Address of New Registered Agent:

CIARAMELLA, FRANK
3110 W 45TH ST
SUITE D
WEST PALM BEACH, FL 33407 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:

04/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CIARAMELLA, FRANK
Address: 3110 W 45TH ST #D
City-St-Zip: WEST PALM BEACH, FL 33427

Title: D () Delete
Name: CIARAMELLA, VERONICA
Address: 3110 W 45TH ST #D
City-St-Zip: WEST PALM BEACH, FL 33427

Title: D () Delete
Name: HOCHSTAEDT, CAROL
Address: 2973 FRENCHMAN'S PRESERVE
City-St-Zip: PALM BEACH GARDENS, FL 33140

Title: D () Delete
Name: MASON, LORONNIE
Address: 711 N FLAGLER DR
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: BESS, ALEX
Address: 1617 SILVER BEACH RD
City-St-Zip: RIVIERA BEACH, FL 33404

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VERONICA CIARAMELLA

D

04/24/2009

Electronic Signature of Signing Officer or Director

Date