


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000040115 1. Entity Name CIRILLO INSURANCE & FINANCIAL SERVICES INC.	
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Principal Place of Business 3658 WEBBER ST. SARASOTA, FL 34232	Mailing Address 3658 WEBBER ST. SARASOTA, FL 34232
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01052006 No Chg-P CR2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

6. Name and Address of Current Registered Agent CIRILLO, JAMES M 4481 ELEUTHERA CT. SARASOTA, FL 34233

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CIRILLO, JAMES M 4481 ELEUTHERA CT. SARASOTA, FL 34233
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CIRILLO, SHARON M 4481 ELEUTHERA CT. SARASOTA, FL 34233
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James M Cirillo 1-5-06 941-921-6630
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #