

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000024254

Entity Name: CHRIS SIMONETTI, INC.

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

4515 DEL PRADO BLVD, STE 5
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

4515 DEL PRADO BLVD, STE 5
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 65-1095084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMONETTI, CARRIE
1123 SE 1ST TERRACE
CAPE CORAL, FL 33990 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: D () Delete
Name: SIMONETTI, CHRIS
Address: 1123 SE 1ST TERRACE
City-St-Zip: CAPE CORAL, FL 33990

Title: D () Delete
Name: ADKISON, BEN
Address: 4033 SW 22ND STREET
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: CHRIS SIMONETTI

D

04/11/2005

Electronic Signature of Signing Officer or Director

Date