

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000029121

Entity Name: GARY PONTRELLI, INC.

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1405 HAVERVILLE DRIVE  
TRINITY, FL 34655

**New Principal Place of Business:**

**Current Mailing Address:**

1405 HAVERVILLE DRIVE  
TRINITY, FL 34655

**New Mailing Address:**

1405 HAVERHILL DRIVE  
TRINITY, FL 34655

FEI Number: 59-3705392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COLLIER, JAMES H SR  
5036 BLUE HERON DRIVE  
NEW PORT RICHEY, FL 34652 US

**Name and Address of New Registered Agent:**

COLLIER, JAMES H SR  
7840 PIER ROAD  
PORT RICHEY, FL 34668 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: JAMES H COLLIER SR

02/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PONTRELLI, GARY  
Address: 1405 HAVERHILL DRIVE  
City-St-Zip: TRINITY, FL 34655

I hereby 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 all other like empowered.

SIGNATURE: GARY PONTRELLI

P

02/28/2011

Electronic Signature of Signing Officer or Director

Date