2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062817

FILED Apr 01, 2005 Secretary of State

Entity Name: FRANK D'ALESSANDRO EQUITY FUNDING, INC.

ourrent i	Principal Place	OI DUSINESS:	New Principal	Place of Business:
	VERSITY POIN	ITE DRIVE		
SUITE 10 FT. MYEF	RS, FL 33907			
Current I	Mailing Addres	ss:	New Mailing A	Address:
SUITE 10	VERSITY POIN 10 RS, FL 33907	ITE DRIVE		
FEI Numbe	r: 65-1116479	FEI Number Applied For ()	FEI Number Not Applicab	le () Certificate of Status Desired ()
Name an	d Address of (Current Registered Agent:	Name and Ade	dress of New Registered Agent:
7800 UNI SUITE 10	ER, ROSANNE VERSITY POIN 10 RS, FL 33907	ITE DRIVE		
	e named entity te of Florida.	submits this statement for the p	purpose of changing its re	egistered office or registered agent, or bo
n the Sta	te or i fortua.			
	JRE:	nic Signature of Registered Ag	ent	Date
SIGNATU	JRE:	nic Signature of Registered Ag g Trust Fund Contribution().	ent	Date
SIGNATU	JRE:	g Trust Fund Contribution().		Date HANGES TO OFFICERS AND DIRECT
Election Ca OFFICER Title: Name: Address:	Electron Ampaign Financin RS AND DIRECT ST (D'ALESSANDR 7800 UNIVERS	g Trust Fund Contribution (). TORS:) Delete O, FRANK SITY POINTE DRIVE, SUITE 100		
Election Ca OFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	Electron Ampaign Financin RS AND DIRECT ST (D'ALESSANDR 7800 UNIVERS FT. MYERS, FI P (GAUTHIER, RG 7800 UNIVERI	g Trust Fund Contribution (). ETORS:) Delete EO, FRANK SITY POINTE DRIVE, SUITE 100 L 33907) Delete DSANNE G TY POINTE DR., SUITE 100	ADDITIONS/C Title: Name: Address:	HANGES TO OFFICERS AND DIRECT
SIGNATU	Electron Electr	g Trust Fund Contribution (). STORS:) Delete CO, FRANK SITY POINTE DRIVE, SUITE 100 L 33907) Delete DSANNE G TY POINTE DR., SUITE 100 L 33907) Delete DSANNE G DSANNE G DSANNE G DSANNE G DSANNE G DSANNE G DSANNE S	ADDITIONS/C Title: Name: Address: City-St-Zip: Title: Name: Address:	HANGES TO OFFICERS AND DIRECT

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: ROSANNE GAUTHIER P 04/01/2005