

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000064660

Entity Name: A. CATALDI & ASSOCIATES, INC.

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

19632 EAGLES VIEW CIRCLE  
UMATILLA, FL 32784

## **New Principal Place of Business:**

12320 COUNTY ROAD 44  
LEESBURG, FL 34788

## **Current Mailing Address:**

19632 EAGLES VIEW CIRCLE  
UMATILLA, FL 32784

## **New Mailing Address:**

FEI Number: 65-1120941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CATALDI, ANTHONY JR.  
19632 EAGLES VIEW CIR.  
UMATILLA, FL 32784 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

## **OFFICERS AND DIRECTORS:**

Title: D  
Name: QUINN, SHAWN  
Address: 944 CLUB HILLS DR.  
City-St-Zip: EUSTIS, FL 32727

Title: D  
Name: CATALDI, ANTHONY JR  
Address: 19632 EAGLES VIEW CIRCLE  
City-St-Zip: UMATILLA, FL 32784

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: ANTHONY CATALDI

PRES

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date