

FILED  
Mar 13, 2008 8:00 am  
Secretary of State

02-29-2008 90015 023 \*\*\*150.00

2008 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # P01000092842

1. Entity Name  
JOHN AGNELLI CONSTRUCTION INC.



Principal Place of Business  
6000 MARINA DR. SUITE 107  
HOLMES BEACH, FL 34217

Mailing Address  
6000 MARINA DR. SUITE 107  
HOLMES BEACH, FL 34217

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01302008

Chg-P

CR2E034 (12/06)

4. FEI Number

65-1133193

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~IZZO, JOHN P.  
180 NO. INDIANA AVE  
ENGLEWOOD, FL 34223~~

Sasha Ross  
Grimes Goebel Grimes  
1023 Manatee Ave W.  
Bradenton, FL 34205

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

*Sasha Ross*

Signature, typed or printed name of registered agent and state if applicable.

(NOTE: Registered Agent signature required when releasing)

3/11/08

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P  
AGNELLI, JOHN  
7800 18TH AVE WEST  
BRADENTON, FL 34209 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
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STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

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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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*John Agnelli*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/08

Date

941-779-0765

Daytime Phone #