

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000107944

**FILED**  
**Apr 06, 2010**  
**Secretary of State**

**Entity Name:** NICOLETTI CONSTRUCTION, INC.

**Current Principal Place of Business:**

3212 GULFVIEW DRIVE  
HERNANDO BEACH, FL 34607

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3211  
SPRING HILL, FL 346113211 US

**New Mailing Address:**

**FEI Number:** 59-3753513

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NICOLETTI, SCOTT  
3212 GULFVIEW DRIVE  
HERNANDO BEACH, FL 34607 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:** PDST  
**Name:** NICOLETTI, SCOTT  
**Address:** 3212 GULFVIEW DRIVE  
**City-St-Zip:** HERNANDO BEACH, FL 34607

**Title:** V  
**Name:** NICOLETTI, CATHERINE  
**Address:** 3212 GULFVIEW DRIVE  
**City-St-Zip:** HERNANDO BEACH, FL 34607

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:** SCOTT NICOLETTI

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04/06/2010

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

\_\_\_\_\_  
Date