


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000122061 1. Entity Name DON GIOVANNI OF LONGBOAT KEY, INC.	
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Principal Place of Business 5610 GULF OF MEXICO DRIVE SUITE 5 LONGBOAT KEY, FL 34228	Mailing Address 5610 GULF OF MEXICO DRIVE SUITE 5 LONGBOAT KEY, FL 34228
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02102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 03-0447447	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent DRAKE, J. KEVIN 1432 FIRST STREET SARASOTA, FL 34236

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PADULA, DOMENICO 1006 VILLAGIA CIR #204 SARASOTA, FL 34237
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STAN, ALEXANDER E 2903 MARSHALL DRIVE SARASOTA, FL 34239
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/28/06-80013-025 150.00

**DO NOT WRITE
IN THIS SPACE**

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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/13/06 941-383-0013
Daytime Phone #