

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017285

Entity Name: DOMENIC'S PIZZA, INC.

FILED  
Mar 23, 2005  
Secretary of State

## Current Principal Place of Business:

2245 PLANTATION CTR DR  
#26  
ORANGE PARK, FL 32003

## New Principal Place of Business:

## Current Mailing Address:

624 THOMAS MCKEEN STREET  
ORANGE PARK, FL 32073

## New Mailing Address:

FEI Number: 04-3606520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PANICCIA, HEATHER L  
624 THOMAS MCKEEN STREET  
ORANGE PARK, FL 32073 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: P ( ) Delete  
Name: PANICCIA, DOMENIC  
Address: 624 THOMAS MCKEEN STREET  
City-St-Zip: ORANGE PARK, FL 32073

Title: VT ( ) Delete  
Name: PANICCIA, HEATHER L  
Address: 624 THOMAS MCKEEN STREET  
City-St-Zip: ORANGE PARK, FL 32073

Title: S (X) Delete  
Name: MEIER, CAROL A  
Address: 8872 CHERRY HILL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: AT (X) Delete  
Name: RICE, GERALD  
Address: 624 THOMAS MCKEEN STREET  
City-St-Zip: ORANGE PARK, FL 32073

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VTS (X) Change ( ) Addition  
Name: PANICCIA, HEATHER L  
Address: 624 THOMAS MCKEEN STREET  
City-St-Zip: ORANGE PARK, FL 32073

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HEATHER L PANICCIA

VTS

03/23/2005

Electronic Signature of Signing Officer or Director

Date