

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017572

**FILED**  
**Jul 27, 2006**  
**Secretary of State**

**Entity Name:** ANNODIVAD VENTURE GROUP, INC.

**Current Principal Place of Business:**

18480 PAULSON DR.  
B-4  
PORT CHARLOTTE, FL 33954 US

**New Principal Place of Business:**

**Current Mailing Address:**

18415 AVON AVE.  
PORT CHARLOTTE, FL 33948

**New Mailing Address:**

18480 PAULSON DR  
SUITE B4  
PORT CHARLOTTE, FL 33954

**FEI Number:** 45-0471503

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STURGES, ERNEST W JR.  
223 TAYLOR ST.  
PUNTA GORDA, FL 33950 US

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

KALLNISCHKIES, D. E  
18415 AVON AVE.  
PORT CHARLOTTE, FL 33948 US

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: DONNA E. KALLNISCHKIES

07/27/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KALLNISCHKIES, DONNA  
Address: 18415 AVON AVE.  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D ( ) Delete  
Name: AQUILA, DAVID J  
Address: 155 MORGAN LANE  
City-St-Zip: PORT CHARLOTTE, FL 33952

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 Chapter 119, 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: D.E. KALLNISCHKIES

PRES

07/27/2006

Electronic Signature of Signing Officer or Director

Date