

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026335

FILED
Jan 15, 2006
Secretary of State

Entity Name: CONTE & ASSOCIATES INC.

Current Principal Place of Business:

8340 W LAKE DR
LAKE CLARK SHORES, FL 33403

New Principal Place of Business:

8340 W LAKE DR
LAKE CLARK SHORES, FL 33406

Current Mailing Address:

8340 W LAKE DR
LAKE CLARK SHORES, FL 33403

New Mailing Address:

8340 W LAKE DR
LAKE CLARK SHORES, FL 33406

FEI Number: 45-0471894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTE, PATRICIA M
8340 W LAKE DR
LAKE CLARK SHORES, FL 33403 US

Name and Address of New Registered Agent:

CONTE, PATRICIA M
8340 W LAKE DR
LAKE CLARK SHORES, FL 33406 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: PATRICIA M. CONTE

01/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: CONTE, PATRICIA M
Address: 8340 W LAKE DR
City-St-Zip: LAKE CLARK SHORES, FL 33403

Title: D () Delete
Name: CONTE, PATRICIA M
Address: 8340 W LAKE DR
City-St-Zip: LAKE CLARK SHORES, FL 33403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: CONTE, PATRICIA M
Address: 8340 W LAKE DR
City-St-Zip: LAKE CLARK SHORES, FL 33406

Title: D (X) Change () Addition
Name: CONTE, PATRICIA M
Address: 8340 W LAKE DR
City-St-Zip: LAKE CLARK SHORES, FL 33406

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: PATRICIA M. CONTE

PVST

01/15/2006

Electronic Signature of Signing Officer or Director

Date