2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# P02000119283

Entity Name: LAURIE A. BELLICO, P.A.

Current Principal Place of Business:

4819 LASQUETI WAY
NAPLES, FL 34119

New Principal Place of Business:

1190 26TH AVE N
NAPLES, FL 34103

Current Mailing Address:

4819 LASQUETI WAY
NAPLES, FL 34119

New Mailing Address:

1190 26TH AVE N
NAPLES, FL 34103

FEI Number: 56-2301440 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BELLICO, LAURIE A
4819 LASQUETI WAY
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

BELLICO, LAURIE A
1190 26TH AVE N
NAPLES, FL 34103 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: _____ 05/01/2008
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: BELLICO, LAURIE A
Address: 4819 LASQUETI WAY
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BELLICO, LAURIE A
Address: 1190 26TH AVE N
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify 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: LAURIE A. BELLICO, PA PRES 05/01/2008
Electronic Signature of Signing Officer or Director — Date