


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90014 001 ***150.00

DOCUMENT # P02000125995
 1. Entity Name
 VECELLIO GROUP, INC.



Principal Place of Business
 101 SANSBURY'S WAY
 WEST PALM BEACH, FL 33411

Mailing Address
 PO BOX 15065
 WEST PALM BEACH, FL 33416

40022950

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.



02162007 Chg-P CR2E034 (12/06)

City & State
 Zip Country

4. FEI Number
 22-3884861

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 DEFREHN, JOHN A
 101 SANSBURY'S WAY
 WEST PALM BEACH, FL 33411

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

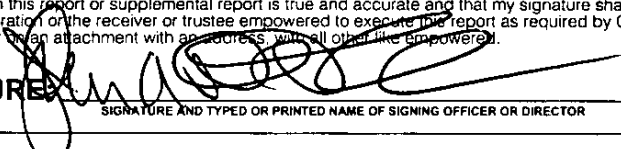
10. OFFICERS AND DIRECTORS

TITLE	ST	<input type="checkbox"/> Delete
NAME	DEFREHN, JOHN A	
STREET ADDRESS	6500 N. MILITARY TRAIL #14	
CITY-ST-ZIP	WEST PALM BEACH, FL 33407	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	VECELLIO, MICHAEL A	
STREET ADDRESS	232 WEST INDIES DRIVE	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	PD	<input type="checkbox"/> Delete
NAME	VECELLIO, LEO A JR	
STREET ADDRESS	210 VIA DEL MAR	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	VECELLIO, KATHRYN C	
STREET ADDRESS	210 VIA DEL MAR	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	VECELLIO, CHRISTOPHER S	
STREET ADDRESS	742 SLOPE TRAIL	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BASHAW, DAVID H	
STREET ADDRESS	101 SANSBURY'S WAY	
CITY-ST-ZIP	WEST PALM BEACH, FL 33411	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	232 WEST INDIES DRIVE	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 as an attachment with an address with all other like empowered.

SIGNATURE  DATE 2/16/07 DAYTIME PHONE # 561-793-9400

ATTACHMENT

40022950

P02000125-99J-

VP Robert D Smith
115 CAPE POINT CIRCLE
JUPITER, FL 33477

VP John West
2786 BAYONNE DR
PALM BEACH GARDENS FL 33410

VP ROBERT LEADBETTER
8923 BRITTANY LAKES DR
BOYNTON BEACH, FL 33437

VP PAULA BURGESS
2071 RESTON CIRCLE
ROYAL PALM BEACH, FL 33411