

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000042442

Entity Name: JOSEPH SICURELLA, P.A.

FILED
Oct 21, 2005
Secretary of State

Current Principal Place of Business:

577 DELTONA BOULEVARD
SUITE 12213
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

577 DELTONA BOULEVARD
SUITE 12213
DELTONA, FL 32725

New Mailing Address:

FEI Number: 54-2112279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SICURELLA, JOSEPH
577 DELTONA BOULEVARD
SUITE 12817
DELTONA, FL 32725 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SICURELLA, JOSEPH
Address: 721 LEMON BLUFF ROAD
City-St-Zip: OSTEEN, FL 32764

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MASSI, KEITH
Address: 9850 HIDDEN DUNES LANE
City-St-Zip: ORLANDO, FL 32832

Title: VP () Change (X) Addition
Name: JEWELL, PAUL
Address: 1213 FAIRGREEN COURT
City-St-Zip: CLERMONT, FL 34711

Title: D () Change (X) Addition
Name: SICURELLA, JOSEPH
Address: 721 LEMON BLUFF ROAD
City-St-Zip: OSTEEN, FL 32764

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: KEITH MASSI

P

10/21/2005

Electronic Signature of Signing Officer or Director

Date