

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000074312

FILED
Mar 06, 2006
Secretary of State

Entity Name: ROSSELLO & ASSOCIATES, INC.

Current Principal Place of Business:

10329 CROSS CREEK BLVD SUITE O
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

10329 CROSS CREEK BLVD SUITE O
TAMPA, FL 33647

New Mailing Address:

FEI Number: 20-0195215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OHALL, LAURIE E
1520 WEST CLEVELAND STREET
TAMPA, FL 33606 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: TURKO, SALLIE D
Address: 10329 CROSS CREEK BLVD., SUITE O
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: LAFAVE, KRISTIAN O
Address: 6328 OSPREY LAKE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRT (X) Change () Addition
Name: TURKO, SALLIE D
Address: 10329 CROSS CREEK BLVD., SUITE O
City-St-Zip: TAMPA, FL 33647

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: SALLIE TURKO

PRT

03/06/2006

Electronic Signature of Signing Officer or Director

Date