

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90049 015 ***158.75

DOCUMENT # P03000115476

1. Entity Name

GALLIONE.COM, INC.



Principal Place of Business

11030 NW 28TH STREET
CORAL SPRINGS FL 33065
US

Mailing Address

11030 NW 28TH STREET
CORAL SPRINGS FL 33065
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E034 (10/04)

4. FEI Number

86-1084201

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE LAW OFFICES OF KEVIN D. WILKINSON
12794 WEST FOREST HILL BOULEVARD
SUITE 28 - B
WEST PALM BEACH FL 33414

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME GALLIONE, RICHARD K SR.
STREET ADDRESS 11030 NW 28TH STREET
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE CHAIRMAN, DIRECTOR, PRESIDENT ☒ Change ☐ Addition
NAME RICHARD K. GALLIONE, SR.
STREET ADDRESS 11030 N.W. 28TH STREET
CITY-ST-ZIP CORAL SPRINGS, FL 33065-3507

TITLE V ☐ Delete
NAME GALLIONE, LORIDANA
STREET ADDRESS 11030 NW 28TH STREET
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE VP, VICE CHAIRMAN, DIRECTOR ☒ Change ☐ Addition
NAME LORIDANA GALLIONE
STREET ADDRESS 11030 NW 28TH STREET
CITY-ST-ZIP CORAL SPRINGS, FL 33065-3507

TITLE D ☒ Delete
NAME HENNESSEY, JOHN F D
STREET ADDRESS 178 N. PLEASANT AVENUE
CITY-ST-ZIP RIDGEWOOD NJ 07540

TITLE ☐ Change ☐ Addition
NAME *DELETE
STREET ADDRESS *DELETE
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WILKINSON, KEVIN D D
STREET ADDRESS 12704 W. FOREST HILL BOULEVARD-#28-B
CITY-ST-ZIP WEST PALM BEACH FL 33414

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DIRECTOR ☐ Delete
NAME MARY M. HENNESSEY
STREET ADDRESS 178 NORTH PLEASANT AVENUE
CITY-ST-ZIP RIDGEWOOD, NEW JERSEY 07540

TITLE DIRECTOR ☐ Change ☒ Addition
NAME MARY M. HENNESSEY
STREET ADDRESS 178 NORTH PLEASANT AVENUE
CITY-ST-ZIP RIDGEWOOD, NEW JERSEY 07540

TITLE DIRECTOR ☐ Delete
NAME CHESTER P. CHECKETT
STREET ADDRESS 27 GRASMERE COURT
CITY-ST-ZIP STATEN ISLAND, NEW YORK 10305

TITLE DIRECTOR ☐ Change ☒ Addition
NAME CHESTER P. CHECKETT
STREET ADDRESS 27 GRASMERE COURT
CITY-ST-ZIP STATEN ISLAND, NEW YORK 10305-1563

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with another like empowered.

SIGNATURE:

Richard K. Gallione PRESIDENT, 1/24/05 954-255-5712
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #