

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000126076

1. Entity Name
DOMINELLO CONTRACTING, INC.



**FILED
Feb 15, 2008 8:00 am
Secretary of State**

02-15-2008 90003 037 ***150.00

Principal Place of Business
9101 S.W. HOPWOOD AVE.
INDIANTOWN, FL 34956

Mailing Address

9101 S.W. HOPWOOD AVE.
INDIANTOWN, FL 34956



01072008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

56-2417543

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DOMINELLO, JOSEPH E
9101 S.W. HOPWOOD AVE.
INDIANTOWN, FL 34956

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D DOMINELLO, JOSEPH E
NAME
STREET ADDRESS 9101 S.W. HOPWOOD AVE.
CITY-ST-ZIP INDIANTOWN, FL 34956

Delete

TITLE V BENTLEY, DWAYNE D
NAME
STREET ADDRESS 9101 S.W. HOPWOOD AVE.
CITY-ST-ZIP INDIANTOWN, FL 34956

Delete

TITLE D LAZZARO, TIMOTHY J
NAME
STREET ADDRESS 3048 RUSS ROAD
CITY-ST-ZIP MARIANNA, FL 32448

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

D P T

Change Addition

Change Addition

*S Hennigan, Charles W. Change Addition
3048 Russ Road
Marianna, FL 32448*

Change Addition

Change Addition

Change Addition

Change Addition

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph C. Dominello President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-08 772-285-2475

Date

Daytime Phone #