


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000133481
1. Entity Name
JOHN PATELLIS, INC.



Principal Place of Business
9833 SIR FREDRICK STREET
TAMPA, FL 33637

Mailing Address
9833 SIR FREDRICK STREET
TAMPA, FL 33637

DO NOT WRITE IN THIS SPACE



D4252006 No Chg-P CR2E034 (11/05)

4. FEI Number
55-0851116

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
PATELLIS, JOHN M
9833 SIR FREDRICK STREET
TAMPA, FL 33637

**DO NOT WRITE
IN THIS SPACE**

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 remaining)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PATELLIS, JOHN M 9833 SIR FREDRICK STREET TAMPA, FL 33637
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILLEY, MARTIN 9833 SIR FREDRICK STREET TAMPA, FL 33637
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05/16/06-80029-006 150.00

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IN THIS SPACE**

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: John Patellis 4-24-06 813 767 6517
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #