## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000155199

Entity Name: FRANK SCARANGELLA INC.

FILED Jun 29, 2005 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

1832 ORMOND ROAD

JACKSONVILLE, FL 32225

1600 MILL CREEK ROAD
APT 401

JACKSONVILLE, FL 32211

Current Mailing Address: New Mailing Address:

1832 ORMOND ROAD
JACKSONVILLE, FL 32225
1600 MILL CREEK ROAD
APT 401

JACKSONVILLE, FL 32211

FEI Number: 20-0494599 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRIZENDINE, JUDITH G 1249 SOARING FLIGHT WAY JACKSONVILLE, FL 32225 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution (X).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition SCARANGELLA, FRANK D SCARANGELLA, FRANK D Name: Name: 1832 ORMOND ROAD 1600 MILL CREEK RD. APT 401 Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32211

Title: V (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SCARANGELLA, JIMMY
 Name:

 Address:
 13242 ARBOR VITAE DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:

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: FRANK SCARANGELLA P 06/29/2005