

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036410

Entity Name: NOLETTE VENTURES INC.

FILED
Jan 09, 2006
Secretary of State

Current Principal Place of Business:

9293 SILVER LAKE DR
LEESBURG, FL 34783

New Principal Place of Business:

8893 US HWY 441 / P.O. BOX 895037
LEESBURG, FL 34789

Current Mailing Address:

9293 SILVER LAKE DR
LEESBURG, FL 34783

New Mailing Address:

8893 US HWY 441 / P.O. BOX 895037
LEESBURG, FL 34789

FEI Number: 11-3712935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOLETTE, JOSEPH H
9293 SILVER LAKE DR
LEESBURG, FL 34783 US

Name and Address of New Registered Agent:

NOLETTE, JOSEPH H
8893 US HWY 441
LEESBURG, FL 34789 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: JOSEPH H. NOLETTE

01/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NOLETTE, JOSEPH H
Address: 9293 SILVER LAKE DR
City-St-Zip: LEESBURG, FL 34783

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NOLETTE, JOSEPH H
Address: 8896 US HWY 441
City-St-Zip: LEESBURG, FL 34789

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: JOSEPH H. NOLETTE

D

01/09/2006

Electronic Signature of Signing Officer or Director

Date