

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062410

Entity Name: ITALIANO, INC.

FILED
Apr 19, 2005
Secretary of State

Current Principal Place of Business:

3439 WEDGEWOOD LANE
SOUTHERN TERRACE PLAZA
THE VILLAGES, FL 32159

New Principal Place of Business:

3439 WEDGEWOOD LANE
THE VILLAGES, FL 32159

Current Mailing Address:

3439 WEDGEWOOD LANE
SOUTHERN TERRACE PLAZA
THE VILLAGES, FL 32159

New Mailing Address:

3439 WEDGEWOOD LANE
THE VILLAGES, FL 32159

FEI Number: 20-1017682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARD S. BERGHOLTZ, P.A.
1107 NORTH DONNELLY STREET
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MANCO, GIOVANNI
Address: 32 SIERRA DRIVE
City-St-Zip: TAVARES, FL 32778

Title: VP () Delete
Name: STONE, JULIE M
Address: 602 WEDGEWOOD LANE
City-St-Zip: THE VILLAGES, FL 32162

Title: S,T () Delete
Name: STONE, JULIE M
Address: 602 WEDGEWOOD LANE
City-St-Zip: THE VILLAGES, FL 32162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANCO, GIOVANNI
Address: 602 WEDGEWOOD LANE
City-St-Zip: THE VILLAGES, FL 32162

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JULIE MANCO

VP

04/19/2005

Electronic Signature of Signing Officer or Director

Date