

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000096805

**FILED**  
**Apr 28, 2006**  
**Secretary of State**

**Entity Name:** MICHAEL J. MORELLI, P.A.

**Current Principal Place of Business:**

10946 CROSS CREEK BLVD.  
# 313  
TAMPA, FL 33647 US

**New Principal Place of Business:**

18530 AVOCET DRIVE  
LUTZ, FL 33558 US

**Current Mailing Address:**

10946 CROSS CREEK BLVD.  
# 313  
TAMPA, FL 33647 US

**New Mailing Address:**

18530 AVOCET DRIVE  
LUTZ, FL 33558 US

**FEI Number:** 90-0186591

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MORELLI, MICHAEL J  
10946 CROSS CREEK BLVD.  
# 313  
TAMPA, FL 33647 US

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

MORELLI, MICHAEL J P  
18530 AVOCET DRIVE  
LUTZ, FL 33558 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: MICHAEL J. MORELLI

04/28/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MORELLI, MICHAEL J  
Address: 10946 CROSS CREEK BLVD., # 313  
City-St-Zip: TAMPA, FL 33647 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MORELLI, MICHAEL J P  
Address: 18530 AVOCET DRIVE  
City-St-Zip: LUTZ, FL 33558 US

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: MICHAEL J. MORELLI

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date