

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102124

FILED  
Mar 15, 2006  
Secretary of State

Entity Name: CASSATA DEVELOPMENT ORGANIZATION, INC.

## Current Principal Place of Business:

2033 MAIN STREET  
SUITE 500  
SARASOTA, FL 34237

## New Principal Place of Business:

## Current Mailing Address:

2033 MAIN STREET  
SUITE 500  
SARASOTA, FL 34237

## New Mailing Address:

FEI Number: 35-2233762

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PFLUGNER, J GEOFFREY  
2033 MAIN STREET  
SUITE 500  
SARASOTA, FL 34237 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: CASSATA, ROSARIO  
Address: 1111 RT. 110 SUITE 300  
City-St-Zip: FARMINGDALE, NY 11735

Title: VP (X) Delete  
Name: CLARKE, JAMES D  
Address: 7511 SOUTH TAMIAMI TRAIL  
City-St-Zip: SARASOTA, FL 34231

Title: VP ( ) Delete  
Name: PFLUGNER, J GEOFFREY  
Address: 2033 MAIN STREET SUITE 500  
City-St-Zip: SARASOTA, FL 34237

Title: T ( ) Delete  
Name: SALVATORE, JOSEPHINE  
Address: 1111 RT. 110 SUITE 300  
City-St-Zip: FARMINGDALE, NY 11735

Title: S ( ) Delete  
Name: PFLUGNER, JOHN G  
Address: 2033 MAIN STREET SUITE 500  
City-St-Zip: SARASOTA, FL 34237

Title: VP ( ) Delete  
Name: CASSATA, VINCENT  
Address: 1111 RT 110 SUITE 300  
City-St-Zip: FARMINGDALE, NY 11735

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: J GEOFFREY PFLUGNER

VP

03/15/2006

Electronic Signature of Signing Officer or Director

Date