

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000109137

FILED
Apr 20, 2006
Secretary of State

Entity Name: DI PIAZZA GENERAL CONTRACTING & DEVELOPMENT, INC.

Current Principal Place of Business:

5848 SANDY POINTE
SARASOTA, FL 34233

New Principal Place of Business:

5848 SANDY POINTE DRIVE
SARASOTA, FL 34233

Current Mailing Address:

5848 SANDY POINTE
SARASOTA, FL 34233

New Mailing Address:

5848 SANDY POINTE DRIVE
SARASOTA, FL 34233

FEI Number: 20-1429329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DI PIAZZA, FRANK
5848 SANDY POINTE
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

DI PIAZZA, FRANK
5848 SANDY POINTE DRIVE
SARASOTA, FL 34233 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: FRANK DI PIAZZA

04/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DI PIAZZA, FRANK
Address: 5848 SANDY POINTE DR
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: DI PIAZZA, JOSEPH F
Address: 5848 SANDY POINTE DR
City-St-Zip: SARASOTA, FL 34233

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D () Change (X) Addition
Name: DI PIAZZA, MICHAEL J
Address: 5848 SANDY POINTE DR
City-St-Zip: SARASOTA, FL 34233

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: FRANK DI PIAZZA

D

04/20/2006

Electronic Signature of Signing Officer or Director

Date