2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015964

Entity Name: SCELTO CONSTRUCTION, INC.

FILED May 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 1408 3804 BLOXHAM CUTOFF ROAD WOODVILLE, FL 323621408 US CRAWFORDVILLE, FL 32327

Current Mailing Address: New Mailing Address:

P.O. BOX 1408

WOODVILLE, FL 323621408 US

FEI Number: 20-2266522 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FRICCHIONE, LISA M FRICCHIONE, LISA M 59 RIDGEWAY COURT 3804 BLOXHÁM CUTOFF ROAD CRAWFORDVILLE, FL 32327 US CRAWFORDVILLE, FL 32327

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: LISA FRICCHIONE 05/15/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition FRICCHIONE, JAMES A FRICCHIONE, JAMES A Name: Name:

59 RIDGEWAY COURT 3804 BLOXHAM CUTOFF ROAD Address: Address: City-St-Zip: CRAWFORDVILLE, FL 32327 US City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: VΡ () Delete Title: VΡ (X) Change () Addition

FRICCHIONE, LISA M FRICCHIONE, LISA M Name: Name:

59 RIDGEWAY COURT Address: 3804 BLOXHAM CUTOFF ROAD Address: CRAWFORDVILLE, FL 32327 US CRAWFORDVILLE, FL 32327 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

VΡ SIGNATURE: LISA FRICCHIONE 05/15/2007