


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 15, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P05000056565</b>	
1. Entity Name JANET DEPETRILLO AND CHERYL BELLIVEAU P.A.	

Principal Place of Business 1293 MYSTIC WAY WELLINGTON, FL 33414	Mailing Address 1293 MYSTIC WAY WELLINGTON, FL 33414
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03012007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  BELLIVEAU, CHERYL L 1293 MYSTIC WAY WELLINGTON, FL 33414	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE *Cheryl Belliveau* CHERYL BELLIVEAU 3/10/07  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007, Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, S BELLIVEAU, CHERYL L 1293 MYSTIC WAY WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, T DEPETRILLO, JANET M 1293 MYSTIC WAY WELLINGTON, FL 33414
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03/23/07-80083-015 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Cheryl Belliveau* CHERYL BELLIVEAU 3/10/07 561-541-6197  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #