

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000083885

FILED
Mar 07, 2009
Secretary of State

Entity Name: STRIVELLI MANAGEMENT, INC.

Current Principal Place of Business:

5 DUNBAR RD.
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

4918 PACIFICO COURT
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

PO BOX 33463
PALM BEACH GARDENS, FL 33420

New Mailing Address:

4918 PACIFICO COURT
PALM BEACH GARDENS, FL 33418

FEI Number: 72-1601357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRIVELLI, RONNI L
2810 BIARRITZ DRIVE
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

STRIVELLI, RONNI L
4918 PACIFICO COURT
PALM BEACH GARDENS, FL 33418 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:

03/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STRIVELLI, RONNI L
Address: 2810 BIARRITZ DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP () Delete
Name: STRIVELLI, STEVEN
Address: 2810 BIARRITZ DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STRIVELLI, RONNI L
Address: 4918 PACIFICO COURT
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP (X) Change () Addition
Name: STRIVELLI, STEVEN
Address: 4918 PACIFICO COURT
City-St-Zip: PALM BEACH GARDENS, FL 33418

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.

SIGNATURE: RONNI STRIVELLI

PRES

03/07/2009

Electronic Signature of Signing Officer or Director

Date