

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 31, 2008 08:00 AM**  
**Secretary of State**



DOCUMENT # P05000155815

1. Entity Name  
 FRANK TORNELLO, INC.

Principal Place of Business  
 591 SEAVIEW COURT  
 UNIT 610A  
 MARCO ISLAND, FL 34145

Mailing Address  
 591 SEAVIEW COURT  
 UNIT 610A  
 MARCO ISLAND, FL 34145



07142008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 14-1942396 Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TORNELLO, FRANK  
 591 SEAVIEW COURT  
 UNIT 610A  
 MARCO ISLAND, FL 34145

**DO NOT WRITE IN THIS SPACE**

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 *Frank Tornello*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE *7/28/08*

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE P  
 NAME TORNELLO, FRANK  
 STREET ADDRESS 591 SEAVIEW CT., UNIT 610A  
 CITY-ST-ZIP MARCO ISLAND, FL 34145

000000956749  
 07/31/08-80003-006 150.00

TITLE  
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 CITY-ST-ZIP

**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: *Frank Tornello*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #