

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000043761

Entity Name: JARED PUGLISI, PA

FILED
Apr 28, 2007
Secretary of State

Current Principal Place of Business:

2018 FOUR MILE COVE PARKWAY
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

2018 FOUR MILE COVE PARKWAY
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWAN, LAWRENCE
1749 NE 10TH TERRACE, UNIT 4
CAPE CORAL, FL 33909 US

Name and Address of New Registered Agent:

SWAN, LAWRENCE
709 CAPE CORAL PARKWAY WEST
CAPE CORAL, FL 33909 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: LAWRENCE SWAN

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PUGLISI, JARED
Address: 2018 FOUR MILE COVE PARKWAY
City-St-Zip: CAPE CORAL, FL 33990

Title: VSTD () Delete
Name: PUGLISI, JARED
Address: 2018 FOUR MILE COVE PARKWAY
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: JARED PUGLISI

PD

04/28/2007

Electronic Signature of Signing Officer or Director

Date