## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 🗸

## Apr 17, 2008 8:00 am Secretary of State **DOCUMENT # P07000032846** 04-17-2008 90022 030 \*\*\*150.00 LUDOVICI BUILDING FIVE, INC. Principal Place of Business Mailing Address 17415 SOUTH DIXIE HIGHWAY 17415 SOUTH DIXIE HIGHWAY PALMETTO BAY, FL 33157-5491 PALMETTO BAY, FL 33157-5491 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142008 Chq-P CR2E034 (12/06) Applied For City & State 4. FEI Number City & State 20-8688148 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LUDOVICI, EDWARD P Street Address (P.O. Box Number is Not Acceptable) 17415 SOUTH DIXIE HIGHWAY PALMETTO BAY, FL 33157-5491 City Zip Code FI 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. to be the SIGNATURE. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 $\Box$ After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DPS Delete TITLE Change Addition TITLE LUDOVICI, EDWARD P NAME STREET ADDRESS 17415 SOUTH DIXIE HIGHWAY STREET ADDRESS CITY-ST-ZIP PALMETTO BAY, FL 331575491 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE LUDOVICI, BARBARA A NAME NAME STREET ADDRESS 17415 SOUTH DIXIE HIGHWAY STREET ADDRESS CITY-ST-ZIP PALMETTO BAY, FL 331575491 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE THILE LUDOVICI, SUSAN M NAME STREET ADDRESS STREET ADDRESS 17415 SOUTH DIXIE HIGHWAY CITY-ST-ZIP **PALMETTO BAY, FL 331575491** CITY-ST-7IP Change Addition ☐ Delete TITLE TITLE LUDOVICI, JOSEPH P NAME NAME STREET ADDRESS 16709 HUTCHINSON ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ODESSA, FL 33556 Change ☐ Addition ☐ Delete TITLE LUDOVICI, LORENA H NAME NAME STREET ADDRESS 16709 HUTCHINSON ROAD STREET ADDRESS CITY-ST-ZIP ODESSA, FL 33556 City-ST-ZIP ☐ Change Addition □ Delete TITLE TITLE LUDOVICI, PHILIP F NAME NAME STREET ADDRESS 17415 SOUTH DIXIE HIGHWAY STREET ADDRESS CITY-ST-ZIP PALMETTO BAY, FL 331575491 12. I hereby certify that the information supplied with this filling 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 drustee empowered to execute this report prequired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachmen with an address, with all other the empowered.