2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# P07000063118

Entity Name: LUDOVICI BUILDING SIX, INC.

Current Principal Place of Business:

17415 SOUTH DIXIE HWY
PALMETTO BAY, FL 331575491

New Principal Place of Business:

Current Mailing Address:

17415 SOUTH DIXIE HWY
PALMETTO BAY, FL 331575491

New Mailing Address:

FEI Number: 26-0298392 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUCOVICI, EDWARD P ESQ.
17415 SOUTH DIXIE HWY
PALMETTO BAY, FL 331575491 US

Name and Address of New Registered Agent:

LUDOVICI, EDWARD P ESQ.
17415 SOUTH DIXIE HWY
PALMETTO BAY, FL 331575491 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: EDWARD P. LUDOVICI 03/02/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LUDOVICI, PHILIP F
Address: 17415 SOUTH DIXIE HWY
City-St-Zip: PALMETTO BAY, FL 331575491

Title: DT ( ) Delete
Name: LUDOVICI, BARBARA A
Address: 17415 SOUTH DIXIE HWY
City-St-Zip: PALMETTO BAY, FL 331575491

Title: DPS ( ) Delete
Name: LUDOVICI, EDWARD P
Address: 17415 SOUTH DIXIE HWY
City-St-Zip: PALMETTO BAY, FL 331575491

Title: DAT ( ) Delete
Name: LUDOVICI, SUSAN M
Address: 17415 SOUTH DIXIE HWY
City-St-Zip: PALMETTO BAY, FL 331575491

Title: D1VP ( ) Delete
Name: LUDOVICI, JOSEPH P
Address: 16709 HUTCHINSON ROAD
City-St-Zip: ODESSA, FL 33556

Title: D2VP ( ) Delete
Name: LUDOVICI, LORENA H
Address: 16709 HUTCHINSON ROAD
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: EDWARD P. LUDOVICI P 03/02/2009
Electronic Signature of Signing Officer or Director Date