

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000070346

Entity Name: FONZO FAMILY, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

2217 PINTA AVE  
SPRING HILL, FL 34609

## New Principal Place of Business:

## Current Mailing Address:

2217 PINTA AVE  
SPRING HILL, FL 34609

## New Mailing Address:

FEI Number: 26-0363231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORRISON, LORI A  
2217 PINTA AVE  
SPRING HILL, FL 34609 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SEC ( ) Delete  
Name: LORI, MORRISON  
Address: 2217 PINTA AVE  
City-St-Zip: SPRING HILL, FL 34609

Title: P ( ) Delete  
Name: KEVIN, FONZO  
Address: 534 RUGBY ST  
City-St-Zip: ORLANDO, FL 32804

Title: VP ( ) Delete  
Name: STEPHEN, FONZO  
Address: 643 PETERSON LAKE RD  
City-St-Zip: COLLIERVILLE, TN 38017

Title: VP ( ) Delete  
Name: GREGORY, FONZO  
Address: 2401 EDGEWATER DR  
City-St-Zip: ORLANDO, FL 32804

## 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:

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: LORI A MORRISON

TREA

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date