

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000083963

FILED
Jan 27, 2011
Secretary of State

Entity Name: PROCACCI PROPERTIES INC.

Current Principal Place of Business:

4820 MAHOGANY RIDGE DR
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

4820 MAHOGANY RIDGE DR
NAPLES, FL 34119

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:

PROCACCI, ARMAND
4820 MAHOGANY RIDGE DR
NAPLES, FL 34119 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

OFFICERS AND DIRECTORS:

Title: PD
Name: PROCACCI, ARMAND
Address: 4820 MAHOGANY RIDGE DR
City-St-Zip: NAPLES, FL 34119

Title: SD
Name: TORKELSON, ED
Address: 1240 BLUE POINT AVE. B16
City-St-Zip: NAPLES, FL 34102

I hereby 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 all other like empowered.

SIGNATURE: ARMAND PROCACCI

PD

01/27/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date