

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000029998

FILED
Apr 28, 2004
Secretary of State

Entity Name: MIDULLA-DEROSE PROPERTIES, INC.

Current Principal Place of Business:

905 SHADED WATER WAY
LUTZ, FL 33549 US

New Principal Place of Business:

Current Mailing Address:

905 SHADED WATER WAY
LUTZ, FL 33549 US

New Mailing Address:

FEI Number: 59-1633902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HODGES, GEOFFREY T
5487 JET PORT INDUSTRIAL BLVD.
TAMPA, FL 33634 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: D () Delete
Name: MIDULLA, WILLIAM
Address: 5107 JULES VERNE CT
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: MURGIO, JOSEPH JR
Address: 727 DAKOTA TRAIL
City-St-Zip: FRANKLIN LAKES, NJ 07417

Title: D () Delete
Name: CHRISTENSEN, GERALDINE
Address: 14210 INDIAN WELLS DR
City-St-Zip: HOUSTON, TX 77069

Title: D () Delete
Name: MURGIO, DIANE
Address: 727 DAKOTA TRAIL
City-St-Zip: FRANKLIN LAKES, NJ 07417

Title: D () Delete
Name: DILORENZO, ERNESTINE
Address: 2756 ELGINFIELD ROAD
City-St-Zip: COLUMBUS, OH 43220

Title: MD () Delete
Name: MIDULLA, JOSEPH D JR.
Address: 2504 SHEFFIELD CRESCENT CT.
City-St-Zip: CHARLOTTE, NC 28226

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
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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 for the exemption stated in Section 119.07(3)(i), 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: JOSEPH D. MIDULLA, JR.

MD

04/28/2004

Electronic Signature of Signing Officer or Director

Date