2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000082849

1. Entity Name
FERRAIUOLO HOLDINGS, INC.

Principal Place of Business	Mailing Address
1914 21ST STREET VERO BEACH, FL 32960	C/O DAVID P. NOVAK 849 20TH STREET VERO BEACH, FL 32960 US

DO NOT WRITE IN THIS SPACE

01092007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
25-1071695	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NOVAK CHARTEGED, DAVID P
849 20TH ST
VERO BEACH, FL 32960

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable   (NOTE Registered Agent signature required when reinstating)   DATE

03/01/07-80081-023   150.00

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	DP
NAME	LUBRANO, DIANE
STREET ADDRESS	1460 CLUB DRIVE
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Diane Lubrano_   2-15-07   DP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #