## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000087812

986 WHISPERPINE DR.

MELBOURNE, FL 32901

Address:

City-St-Zip:

FILED Jan 04, 2007 Secretary of State

Entity Nam	ie: VACCAR	ELLI & ASSOCIATES, INC.		•	
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
986 WHISP MELBOURI	ERPINE DR. NE, FL 32901				
Current Mailing Address:			New Mailing Addres	s:	
986 WHISPERPINE DR. MELBOURNE, FL 32901					
FEI Number:	59-3282400	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ARNO & FREDRICKS 100 HICKORY SUITE 200 W. MELBOURNE, FL 32404 US			ARNO FINANCIAL 100 HICKORY SUITE 200 W. MELBOURNE, FL	100 HICKORY	
The above in the State		submits this statement for the pur	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: ANDREW ARNO				01/04/2007	
Electronic Signature of Registered Agent			İ.	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VACCARELLÌ, 1023 DEL MAR		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VACCARELLI, I 803 DEL MAR (		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	VPD () VACCARELLI, F	Delete RANK	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: FRANK VACCARELLI VPD 01/04/2007