## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000014616

Entity Name: RAPISARDA ENTERPRISES INC.

FILED Apr 22, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

846 MOON LIT LANE CASSELBERRY, FL 32707

**Current Mailing Address: New Mailing Address:** 

846 MOON LIT LANE CASSELBERRY, FL 32707

FEI Number: 59-3325359 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAPISARDA, THOMAS V RAPISARDA, THOMAS V 846 MOONLÍT LANE 795 WIND WILLOW CIR

WINTER SPRINGS, FL 32708 US CASSELBERRY, FL 32707 US

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: 04/22/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete Title: (X) Change ( ) Addition

RAPISARDA, THOMAS V RAPISARDA, THOMAS V Name: Name: 846 MOONLET LN 846 MOONLIT LN Address: Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: CASSELBERRY, FL 32707

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: THOMAS V RAPISARDA **DPS** 04/22/2006