

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000065984

Entity Name: NICK LONGARZO, INC.

FILED  
Jan 22, 2006  
Secretary of State

## Current Principal Place of Business:

4502 NORTHWEST ALSACE AVENUE  
PORT SAINT LUCIE, FL 34983

## New Principal Place of Business:

452 N.W. BILTMORE ST.  
PORT SAINT LUCIE, FL 34983

## Current Mailing Address:

4502 NORTHWEST ALSACE AVENUE  
PORT SAINT LUCIE, FL 34983

## New Mailing Address:

452 N.W. BILTMORE ST.  
PORT SAINT LUCIE, FL 34983

FEI Number: 65-0687038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LONGARZO, NICK C  
4502 N.W. ALSACE AVE.  
PORT ST. LUCIE, FL 34983 US

## Name and Address of New Registered Agent:

LONGARZO, NICK C  
452 N. W. BILTMORE ST.  
PORT ST. LUCIE, FL 34983 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/22/2006

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: LONGARZO, NICK C  
Address: 4502 NORTHWEST ALSACE AVENUE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VSD ( ) Delete  
Name: LONGARZO, AGNES E  
Address: 4502 NORTHWEST ALSACE AVENUE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: LONGARZO, NICK C  
Address: 452 N.W. BILTMORE ST.  
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VSD (X) Change ( ) Addition  
Name: LONGARZO, AGNES E  
Address: 452 N.W. BILTMORE ST.  
City-St-Zip: PORT SAINT LUCIE, FL 34983

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.

SIGNATURE: NICK LONGARZO

Electronic Signature of Signing Officer or Director

PTD

01/22/2006

Date