2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2006
Secretary of State

DOCUMENT# P97000075689

Entity Name: R.G. NOVELLO, INC.

Current Principal Place of Business:

1400 CLINTON ROAD
MONTICELLO, FL 32344

New Principal Place of Business:

Current Mailing Address:

P.O BOX 216
LLOYD, FL 32337

New Mailing Address:

P.O BOX 218
LLOYD, FL 32337

FEI Number: 65-0780418 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOVELLO, RAYMOND G
1402 STURBRIDGE PLACE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

NOVELLO, RAYMOND G
1400 CLINTON RD.
MONTICELLO, FL 32344 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: RAYMOND G. NOVELLO 06/08/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: LISA J NOVELLO,
Address: 1402 STURBRIDGE PLACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: VS ( ) Delete
Name: RAYMOND G NOVELLO,
Address: 1402 STURBRIDGE PLACE
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: LISA J NOVELLO,
Address: 1400 CLINTON RD
City-St-Zip: MONTICELLO, FL 32344

Title: VS (X) Change ( ) Addition
Name: RAYMOND G NOVELLO,
Address: 1400 CLINTON RD
City-St-Zip: MONTICELLO, FL 32344

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: LISA J NOVELLO PT 06/08/2006
Electronic Signature of Signing Officer or Director Date