

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

192

DOCUMENT # P97000082767

1. Entity Name  
BARTHOLOMEW, VITELLI, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 JUL -8 AM 8:00

Principal Place of Business  
420 SE 17TH ST.  
OCALA, FL 34471-4433

Mailing Address  
420 SE 17TH ST.  
OCALA, FL 34471-4433

**DO NOT WRITE IN THIS SPACE**



06112004 No Chg-P CR2E034 (10/03)

*MRD*

4. FEI Number  
59-3469698

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

VITELLI, MARIO  
420 SE 17TH STREET  
OCALA, FL 34478

**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

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	VITELLI, MARIO
STREET ADDRESS	420 SE 17TH ST
CITY-ST-ZIP	OCALA, FL 34471
TITLE	D
NAME	BARTHOLOMEW-VITELLI, CAROL
STREET ADDRESS	420 SE 17TH ST
CITY-ST-ZIP	OCALA, FL 34471
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

200039538562  
07/26/04--01073--014 \*\*163.79

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Mario Vitelli*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-8-04

Date

352-351-5343

Daytime Phone #

282

DATE: 7-8-04

TO:

Division of Corporations  
409 East Gaines Street  
Tallahassee, FL. 32399

FROM:

Mario Vitelli  
420 SE 17<sup>th</sup> Street  
Ocala, FL. 34471

RE:

BARTHOLOMEW VITELLI INC.  
Document # P97000082767

Dear Sir,

After our telephone conversation, as stated. This application was previously mailed .  
It was not received at your office.

Please, receive a copy of the same application and a new bank check for \$163. 79 to cover all  
costs. Disregard previous application and check, if it appears, as I will take care of any previous  
check matters. I thank you for your kindness.

Yours truly,



Mario Vitelli