

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000038304

Entity Name: GALIANO CAREER ACADEMY, INC.

FILED
Feb 18, 2005
Secretary of State

Current Principal Place of Business:

1140 E ALTAMONTE DR STE 1020
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

1140 E ALTAMONTE DR STE 1020
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 59-3518511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GAGLIANO, ANTHONY M
1140 E ALTAMONTE DR STE 1020
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

GALIANO, ANTHONY M
1140 E ALTAMONTE DR STE 1020
ALTAMONTE SPRINGS, FL 32701 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: ANTHONY GALIANO

02/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: GALIANO, KENNETH S J
Address: 2908 LAKEVIEW DR.
City-St-Zip: FERN PARK, FL 32730

Title: DP () Delete
Name: GALIANO, MICHAEL R
Address: 2908 LAKEVIEW DR.
City-St-Zip: FERN PARK, FL 32730

Title: DC () Delete
Name: GALIANO, ANTHONY
Address: 2908 LAKEVIEW DR
City-St-Zip: FERN PARK, FL 32730

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: GALIANO, KENNETH S J
Address: 1140 E. ALTAMONTE DR. SUITE 1020
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: DP (X) Change () Addition
Name: GALIANO, MICHAEL R
Address: 1140 E. ALTAMONTE DRIVE SUITE 1020
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: DC (X) Change () Addition
Name: GALIANO, ANTHONY
Address: 1140 E. ALTAMONTE DRIVE SUITE 1020
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MIKE GALIANO

DP

02/18/2005

Electronic Signature of Signing Officer or Director

Date