2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000030259

Entity Name: SANTONE ENTERPRISES, INC.

FILED Jan 05, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

P.O. BOX 849

NEW PORT RICHEY, FL 34656

Current Mailing Address: New Mailing Address:

5320 LITTLE RD., STE. 300 PO BOX 849

PMB 300 NEW PORT RICHEY, FL 34656 NEW PORT RICHEY, FL 34655

FEI Number: 59-3571645 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:

SANTONE, DOLORES J
5320 LITTLE RD., STE. 300
NEW PORT RICHEY, FL 34655 US
SANTONE, DOLORES J
9831 CONSERVATION DR
NEW PORT RICHEY, FL 34655 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: 01/05/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: SANTONE, DOLORES J Name: SANTONE, DOLORES J Address: 5320 LITTLE RD PMB 300 Address: PO BOX 849

City-St-Zip: NEW PORT RICHEY, FL 34055 City-St-Zip: NEW PORT RICHEY, FL 34656

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

Name: SANTONE, DOLORES J Name: SANTONE, DOLORES J

Address: 5320 LITTLE RD PMB 300 Address: PO BOX 849

City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: NEW PORT RICHEY, FL 34656

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: DOLORES J. SANTONE P 01/05/2007