

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000099324

Entity Name: NOLA PROPERTIES, INC.

FILED  
Apr 28, 2005  
Secretary of State

**Current Principal Place of Business:**

P. O. BOX 21947  
TAMPA, FL 33622

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 21947  
TAMPA, FL 33622

**New Mailing Address:**

FEI Number: 59-3604514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

O'CONNOR, PATRICK M ESQ.  
% PATEL & O'CONNOR,P.A.,2240 BELLEAIR RD.,  
STE.160  
CLEARWATER, FL 33764 US

**Name and Address of New Registered Agent:**

O'CONNOR, PATRICK M ESQ.  
1250 S. BELCHER ROAD  
SUITE 160  
LARGO, FL 337715207 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

04/28/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DEBENEDICTIS, ANTHONY  
Address: P. O. BOX 21947  
City-St-Zip: TAMPA, FL 33622

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANTHONY DEBENEDICTIS

D

04/28/2005

Electronic Signature of Signing Officer or Director

Date