

FILED
Feb 22, 2006 8:00 am
Secretary of State

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01-24-2006 90015 027 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # S18421 1. Entity Name ZEILON INVESTMENTS, INC.			
Principal Place of Business 713 S ORANGE AVE SARASOTA, FL 34236		Mailing Address 713 S ORANGE AVE SARASOTA, FL 34236	
DO NOT WRITE IN THIS SPACE		66002101 	
		01092006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0261667	
		Applied For Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MERCURIO, JOHN C/O MERCURIO & BRIDGFORD PA, CPA'S 713 S ORANGE AVE SARASOTA, FL 34236		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: <u>Inger Zeilon</u> (Inger Zeilon) DATE: <u>2.18.06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when filing statement)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZEILON, INGER 2403 CASEY KEY RD NOKOMIS, FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZEILON, ROLF 2403 CASEY KEY RD NOKOMIS, FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERCURIO, JOHN J 713 S. ORANGE AVE SARASOTA, FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, without other like empowered. SIGNATURE: <u>John J. Mercurio</u> DATE: <u>2/24/06</u> DAYTIME PHONE: <u>941-453-4583</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			