

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S51382

FILED
Jan 06, 2009
Secretary of State

Entity Name: ANTHONY CAPODILUPO FINE ART, INC.

Current Principal Place of Business:

4598 NW 26TH AVE
BOCA RATON, FL 334342518 US

New Principal Place of Business:

135 PLEASANT STREET
SUITE 508
BROOKLINE, MA 024467188 US

Current Mailing Address:

4598 NW 26TH AVE
BOCA RATON, FL 334342518 US

New Mailing Address:

FEI Number: 65-0257557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPODILUPO, ANTHONY
4598 NW 26TH AVE
BOCA RATON, FL 334342518 US

Name and Address of New Registered Agent:

CAPODILUPO, ANTHONY
4598 NW 26TH AVE
BOCA RATON, FL 334342518 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 CAPODILUPO

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAPODILUPO, ANTHONY,
Address: 4598 NW 26TH AVE
City-St-Zip: BOCA RATON, FL 334342518 US

Title: SD () Delete
Name: SOMMER, SANDRA M.,
Address: 4598 NW 26TH AVE
City-St-Zip: BOCA RATON, FL 334342518 US

Title: TD () Delete
Name: LARSEN, BONNY L.,
Address: 4400 N. A1A, APT 701N
City-St-Zip: HUTCHINSON ISL, FL 34949 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAPODILUPO, ANTHONY
Address: 4598 NW 26TH AVE
City-St-Zip: BOCA RATON, FL 334342518 US

Title: SD (X) Change () Addition
Name: SOMMER, SANDRA M
Address: 4598 NW 26TH AVE
City-St-Zip: BOCA RATON, FL 334342518 US

Title: TD (X) Change () Addition
Name: LARSEN, BONNY L DR
Address: 4400 N. A1A, APT 701
City-St-Zip: HUTCHINSON ISL, FL 34949 US

I hereby certify that the information supplied with this filing does not qualify 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: SANDRA M. SOMMER

SECY

01/06/2009

Electronic Signature of Signing Officer or Director

Date