## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S85302

Entity Name: MICHAEL SPINELLI, INC.

FILED Mar 30, 2008 Secretary of State

| Entity Na                                     | Me: MICHAE                              | L SPINELLI, INC.                |  |   |  |
|---|---|---------------------------------|--|---|--|
| Current Principal Place of Business:          |   |                                 | New Principal Place                                    | New Principal Place of Business:          |  |
| P O BOX :<br>WINDERN                          | 2535<br>MERE, FL 347                    | '86 US                          | 5036 DR. PHILLIPS BI<br>SUITE 225<br>ORLANDO, FL 32819 |   |  |
| Current Mailing Address:                      |   |                                 | New Mailing Address                                    | New Mailing Address:                      |  |
| P O BOX :<br>WINDERN                          | 2535<br>MERE, FL 347                    | 786 US                          |  |   |  |
| FEI Number                                    | : 65-0289783                            | FEI Number Applied For ( )      | FEI Number Not Applicable ( )                          | Certificate of Status Desired (X)         |  |
| Name and Address of Current Registered Agent: |   |                                 | Name and Address o                                     | Name and Address of New Registered Agent: |  |
| 1600 W. C<br>FT. LAUD<br>The above            |   | BLVD.<br>33309 US               | purpose of changing its registere                      | d office or registered agent, or both,    |  |
|   | e of Florida.                           |                                 |  |   |  |
| SIGNATU                                       |   | . 0                             |  |   |  |
|   |   | nic Signature of Registered A   | gent   | Date                                      |  |
| Election Ca                                   | mpaign Financir                         | ng Trust Fund Contribution ( ). |  |   |  |
| OFFICERS AND DIRECTORS:                       |   | ADDITIONS/CHANGI                | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:           |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | SPINELLI, MÌC<br>P.O. BOX 253:          |                                 | Title:<br>Name:<br>Address:<br>City-St-Zip:            | () Change () Addition                     |  |
| Title:<br>Name:<br>Address:                   | VPD (<br>SPINELLI, JOS<br>P. O. BOX 253 |                                 | Title:<br>Name:<br>Address:                            | () Change () Addition                     |  |

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: MICHAEL SPINELLI PD 03/30/2008