

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000015805

**FILED**  
**Jan 30, 2010**  
**Secretary of State**

**Entity Name:** FALCONE FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

11030 LUCKY HORSESHOE LANE  
CHARLOTTE, NC 28277

**New Principal Place of Business:**

**Current Mailing Address:**

11030 LUCKY HORSESHOE LANE  
CHARLOTTE, NC 28277

**New Mailing Address:**

**FEI Number:** 16-1715160

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FALCONE, JOHN J  
20612 W GOLDEN ELM DR  
ESTERO, FL 33928 US

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

FALCONE, JOHN J  
19523 SKIDMORE WAY  
APT 103  
ESTERO, FL 33967 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

01/30/2010

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** FALCONE, ANTHONY J  
**Address:** 11030 LUCKY HORSESHOE LANE  
**City-St-Zip:** CHARLOTTE, NC 28277

**Title:** TREA  
**Name:** FALCONE, JOHN J  
**Address:** 19523 SKIDMORE WAY, APT. 103  
**City-St-Zip:** ESTERO, FL 33967

**Title:** SECY  
**Name:** FALCONE, MICHAEL A  
**Address:** 11030 LUCKY HORSESHOE LANE  
**City-St-Zip:** CHARLOTTE, NC 28277

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY J. FALCONE

Electronic Signature of Signing Officer or Director

PRES

01/30/2010

Date