

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154651

FILED  
Aug 23, 2007  
Secretary of State

Entity Name: FABRIZIO & ASSOCIATES, INC.

**Current Principal Place of Business:**

3801 CHANTICLEER CT  
TALLAHASSEE, FL 32311

**New Principal Place of Business:**

**Current Mailing Address:**

3801 CHANTICLEER CT  
TALLAHASSEE, FL 32311

**New Mailing Address:**

117 HINTZE AVE  
MODESTO, CA 95354

FEI Number: 55-0911226

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FABRIZIO, DAVID  
3801 CHANTICLEER CT  
TALLAHASSEE, FL 32311 US

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

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

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FABRIZIO, DAVID  
Address: 3801 CHANTICLEER CT  
City-St-Zip: TALLAHASSEE, FL 32311

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

Title: P (X) Change ( ) Addition  
Name: FABRIZIO, DAVID  
Address: 117 HINTZE AVE  
City-St-Zip: MODESTO, CA 32354

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: DAVE FABRIZIO

P

08/23/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date