## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000001018

Entity Name: WORLDVIEW FINANCIAL LTD, INC.

FILED Feb 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

284S FARIBAIRN DR. 3160 UTAH DRIVE DELTONA, FL 32725 DELTONA, FL 32738

Current Mailing Address: New Mailing Address:

284S FARIBAIRN DR. 3160 UTAH DRIVE DELTONA, FL 32725 DELTONA, FL 32738

FEI Number: 27-0046502 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

VINCI, GUY
28 4S FAIRBAIRN DR.
VINCI, GUY
3160 UTAH DRIVE

DELTONA, FL 32725 US DELTONA, FL 32738 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: GUY VINCI 02/09/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: BALDRIDGE, ORIVLLE D Name: BALDRIDGE, ORIVLLE D

 Address:
 284 S FAIRBAIRN DR.
 Address:
 3160 UTAH DRIVE

 City-St-Zip:
 DELTONA, FL 32725
 City-St-Zip:
 DELTONA, FL 32738

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 ONTIVEROS, ROBIN
 Name:
 VINCI, ROBIN

 Address:
 284 S FAIRBAIRN DR.
 Address:
 3160 UTAH DRIVE

 City-St-Zip:
 DELTONA, FL 32725
 City-St-Zip:
 DELTONA, FL 32738

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf ( ) Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change ( ) Addition}$ 

 Name:
 VINCI, GUY
 Name:
 VINCI, GUY

 Address:
 284 S FAIRBAIRN DR.
 Address:
 3160 UTAH DR.

 City-St-Zip:
 DELTONA, FL 32725
 City-St-Zip:
 DELTONA, FL 32738

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBIN VINCI S 02/09/2007