

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90128 001 ***150.00

DOCUMENT # P02000126765					
1. Entity Name V&R OF ORLANDO, INC.					
Principal Place of Business 2441 S ORANGE AVENUE ORLANDO, FL 32806			Mailing Address P.O. BOX 568272 ORLANDO, FL 32856-8272		
2. Principal Place of Business - No P.O. Box # 601 S Primrose Drive		3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Orlando, FL 32806		City & State		4. FEI Number 01-0756080	
Zip 32806		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILEN, ZELLA W 48 OAKMONT CIRCLE ORMOND BEACH, FL 32174			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Zella W. Wilen Zella W. Wilen</u> DATE <u>4/22/2008</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PD NAME WILEN, RANDALL C SR STREET ADDRESS 2441 S ORANGE AVE CITY-ST-ZIP ORLANDO, FL 32806	<input checked="" type="checkbox"/> Delete		TITLE PD NAME Wilen, Randall C. sr STREET ADDRESS 601 S Primrose Drive CITY-ST-ZIP Orlando, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VD NAME WILEN, VICTORIA K STREET ADDRESS 2441 ORANGE AVE CITY-ST-ZIP ORLANDO, FL 32806	<input checked="" type="checkbox"/> Delete		TITLE VD NAME Wilen, Victoria K STREET ADDRESS 601 S Primrose Drive CITY-ST-ZIP Orlando, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE STD NAME WILEN, ZELLA W STREET ADDRESS 2441 S ORANGE AVE CITY-ST-ZIP ORLANDO, FL 32806	<input checked="" type="checkbox"/> Delete		TITLE STD NAME Wilen, Zella W. STREET ADDRESS 601 S Primrose Drive CITY-ST-ZIP Orlando, FL 32806	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Zella W. Wilen Zella W. Wilen</u>			Date <u>4/22/2008</u> Daytime Phone # <u>407-987-7022</u>		