

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 179060

Entity Name: VELDE FORD, INC.

FILED  
Aug 16, 2007  
Secretary of State

## Current Principal Place of Business:

488 U.S. #1  
VERO BEACH, FL 32962 US

## New Principal Place of Business:

## Current Mailing Address:

488 U.S. #1  
VERO BEACH, FL 32962 US

## New Mailing Address:

FEI Number: 59-0714995

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VELDE, JEFFREY  
5841 BENT PINE DRIVE  
VERO BEACH,, FL 32967 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

## OFFICERS AND DIRECTORS:

Title: PDST ( ) Delete  
Name: VELDE, JEFFREY  
Address: 5841 BENT PINE DR.  
City-St-Zip: VERO BEACH, FL 32967 US

Title: 2VP ( ) Delete  
Name: MALCHOW, SHERRIE L  
Address: 2617 SW ELROD COURT  
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: D ( ) Delete  
Name: EVANS, RALPH L  
Address: 3355 OCEAN DRIVE  
City-St-Zip: VERO BEACH, FL 32963 US

Title: VP ( ) Delete  
Name: VELDE, PATRICIA  
Address: 5841 BENT PINE DRIVE  
City-St-Zip: VERO BEACH, FL 32967

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: 2VP (X) Change ( ) Addition  
Name: VAN WIEREN, JANE  
Address: 105 NE NARANJA AVENUE  
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RALPH L. EVANS

D

08/16/2007

Electronic Signature of Signing Officer or Director

Date