## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # 410524**

1. Entity Name
V. M. CALDERON, INC.



FILED Apr 19, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

4040 RD ROCK LANE SARASOTA, FL 34231 P.O. BOX 4241

SARASOTA, FL 34230-4241 US



## DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 59-1416500 Not Applicable

5. Certificate of Status Desired

04122007

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

CALDERON, VICTOR F 4040 RED ROCK LANE SARASOTA, FL 34231

## DO NOT WRITE IN THIS SPACE

No Chg-P

				HN	INIS SPACE
	named entity submits this statement for the pu ions of registered agent.	rpose of changing its regis	stered office or	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if a	pplicable. (NOTE. Regis	stered Agent signatu	re required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Fi Trust Fund Contribution		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECT	ORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES CALDERON, VICTOR F 4040 RED ROCK LANE SARASOTA, FL	<u> </u>		•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC BARTOLOME, BARBARA B 1621 GEORGETOWNE BLVD SARASOTA, FL 34232				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET AODRESS CITY-SI-ZIP					
TITLE					U00000716187 04/29/07-80007-007 150.00

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 truete ampowered 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 appears in the corporation of the corpora

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9413163708 Daytime Phone #