



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 10, 2007 08:00 AM
Secretary of State

DOCUMENT # 492987 1. Entity Name A V HOLDINGS CORP.		
Principal Place of Business 1711 LONGWOOD ROAD WEST PALM BEACH, FL 33409 US		Mailing Address 1711 LONGWOOD ROAD WEST PALM BEACH, FL 33409 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WILLHITE, THOMAS S PD 1711 LONGWOOD ROAD WEST PALM BEACH, FL 33409		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		DATE 07/10/07-80022-006 550.00
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TAYLOR F M JR 1711 LONGWOOD ROAD WEST PALM BEACH, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILLHITE, THOMAS S. 17695 FOXWOOD WAY BOCA RATON, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



07052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1649711	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**