

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 617472

Entity Name: PMV, INC.

FILED  
Mar 26, 2012  
Secretary of State

**Current Principal Place of Business:**

800 N. MAGNOLIA AVE.  
SUITE 1500  
ORLANDO, FL 32803

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 250743  
DAYTONA BEACH, FL 32125

**New Mailing Address:**

FEI Number: 59-1899136

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEAN MEAD SERVICES, LLC  
800 N. MAGNOLIA AVE.  
SUITE 1500  
ORLANDO, FL 32803 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: PCEO  
Name: TRUILO, ROBERT  
Address: PO BOX 250743  
City-St-Zip: DAYTONA BEACH, FL 32125

Title: DVS  
Name: TRUILO, JULIA D  
Address: PO BOX 250743  
City-St-Zip: DAYTONA BEACH, FL 32125

Title: DV  
Name: DAVIDSON, MARC L  
Address: PO BOX 250743  
City-St-Zip: DAYTONA BEACH, FL 32125

Title: COVT  
Name: KENDALL, DAVID R  
Address: PO BOX 250743  
City-St-Zip: DAYTONA BEACH, FL 32125

I hereby 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 all other like empowered.

SIGNATURE: ROBERT TRUILO

P

03/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date