

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90035 037 ***150.00

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1. Entity Name

VERI-FACT ASSOCIATES INCORPORATED



Principal Place of Business

**8077 38TH AVENUE NORTH
ST PETERSBURG FL 33710
US**

Mailing Address

**P. O. BOX 10141
ST. PETERSBURG FL 33733
US**



2. Principal Place of Business - No P.O. Box #

300 31st Street North

3. Mailing Address

Suite, Apt. #, etc.

Suite #529-E

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

St. Petersburg, FL

City & State

4. FEI Number

59-1991148

Applied For

Not Applicable

Zip

33713

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DI STEFFANO, VINCENT A
8077 38TH AVENUE NORTH
ST PETERSBURG FL 33710**

Name

Street Address (P.O. Box Number is Not Acceptable)

300 31st Street North, Suite #529-E

City

St. Petersburg,

FL

Zip Code

33713

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

[Signature]

4-11-08

Signature, typed or printed name of registered agent and, if applicable,

(NOTE: Registered Agent signature required when removing agent)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	DI STEFANO, VINCENT A	
STREET ADDRESS	8077 38TH AVENUE NORTH	
CITY-ST-ZIP	ST PETERSBURG FL 33710	
TITLE	D	☐ Delete
NAME	DI STEFANO, BEVERLY K.	
STREET ADDRESS	8077 38TH AVENUE NORTH	
CITY-ST-ZIP	ST PETERSBURG FL 33710	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☒ Change ☐ Addition
NAME	
STREET ADDRESS	300 31st Street North, Suite #529-E
CITY-ST-ZIP	St. Petersburg, FL 33713
TITLE	☒ Change ☐ Addition
NAME	
STREET ADDRESS	300 31st Street North, Suite #529-E
CITY-ST-ZIP	St. Petersburg, FL 33713
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
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 Section 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:

[Signature]

Vincent A. Di Stefano 4-11-08 727-321-1800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #