

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F00000004741

1. Entity Name
THE VINE CONNECTION, LTD. CORPORATION



FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90676 033 ***150.00

Principal Place of Business
ROUTE 220
P.O. BOX 414
HOT SPRINGS, VA 24445

Mailing Address
ROUTE 220
P.O. BOX 414
HOT SPRINGS, VA 24445

2. Principal Place of Business
P.O. Box 318
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 318
Suite, Apt. #, etc.



04282004 Chg-P CR2E034 (10/03)

City & State
Mount Dora, FL
Zip 32756 Country USA

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Mount Dora, FL
Zip 32756 Country USA

4. FEI Number
54-1906643
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

BAUER, STEPHEN
104 E 3RD AVE
MOUNT DORA, FL 32757

7. Name and Address of New Registered Agent

Name
Bauer, Stephen
Street Address (P.O. Box Number is Not Acceptable)
1210 E 2nd Ave
City Mount Dora FL Zip Code 32757

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
C	BAUER, SHIRLEY	104 E 3RD AVE	MOUNT DORA, FL 32757	<input type="checkbox"/>
VC	BAUER, STEPHEN	104 E 3RD AVE	MOUNT DORA, FL 32757	<input type="checkbox"/>
D	SHENK, DOROTHY	3346 REDBUD LANE	HARRISONBURG, VA 22801	<input checked="" type="checkbox"/>
D	SHENK, CLAYTON	3346 REDBUD LANE	HARRISONBURG, VA 22801	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
C	Bauer, Shirley	1210 E. 2nd Ave.	Mount Dora, FL 32757	<input checked="" type="checkbox"/>
VC	Bauer, Stephen	1210 E. 2nd Ave.	Mount Dora, FL 32757	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: Shirley Bauer Shirley Bauer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/04

352/383/1631

Date

Daytime Phone #