

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003571

FILED  
Apr 10, 2009  
Secretary of State

Entity Name: VERO BEACH WINNELSON CO.

## Current Principal Place of Business:

2827 FLIGHT SAFETY DRIVE  
VERO BEACH, FL 329607911

## New Principal Place of Business:

## Current Mailing Address:

1000 HURRICANE SHORES RD NE  
SUITE C-100  
LAWRENCEVILLE, GA 30043

## New Mailing Address:

FEI Number: 26-0479838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LITTON, RALPH  
Address: 2827 FLIGHT SAFETY DRIVE  
City-St-Zip: VERO BEACH, FL 329607911

Title: D ( ) Delete  
Name: SALSMAN, MONTE L  
Address: 3110 KETTERING BLVD  
City-St-Zip: DAYTON, OH 45439

Title: D ( ) Delete  
Name: GROUT, CALVIN  
Address: 3110 KETTERING BLVD  
City-St-Zip: DAYTON, OH 45439

Title: D ( ) Delete  
Name: LARKIN, D. MIKE  
Address: 1000 HURRICANE SCOALS ROAD NE BLDG D  
City-St-Zip: LAWRENCEVILLE, GA 300434826

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BOHANNON, RON  
Address: 3110 KETTERING BLVD  
City-St-Zip: DAYTON, OH 45439

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ANITA L LEFTY, AGENT

AGT

04/10/2009

Electronic Signature of Signing Officer or Director

Date