


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 16, 2007 8:00 am**  
**Secretary of State**

04-16-2007 90334 023 \*\*\*150.00

DOCUMENT # F96000004911	
1. Entity Name VPI SALES COMPANY	

Principal Place of Business 1512 SHOLAR AVENUE CHATTANOOGA, TN 37406	Mailing Address P O BOX 5967 CHATTANOOGA, TN 37406
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DO NOT WRITE IN THIS SPACE



04022007 No Chg-P CR2E034 (11/05)

4. FEI Number 62-1653917	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCEO CASEY, CHARLES F 1635 EDGEWOOD CIRCLE CHATTANOOGA, TN 37405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASEY, MARIE E 1635 EDGEWOOD CIRCLE CHATTANOOGA, TN 37405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCP CASEY, CHARLES F II 1613 LAYTON LANE SIGNAL MOUNTAIN, TN 37377
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CASEY, JOHN D 2621 CRESCENT CLUB DR HIXSON, TN 37343
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASEY, THOMAS A 1306 SHADY CIRCLE CHATTANOOGA, TN 37405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KENT, JONATHAN 832 GEORGIA AVE, SUITE 1000 CHATTANOOGA, TN 37402

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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: Charles F. Casey II 4-2-07 423-6970808  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #