

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 07, 2006 8:00 am**  
**Secretary of State**

09-07-2006 90014 009 \*\*\*550.00

**DOCUMENT # G63505**

1. Entity Name

**V & I MAINTENANCE CORPORATION OF CENTRAL  
FLORIDA**



Principal Place of Business

**4405 SW 35 TERR  
GAINESVILLE, FL 32608 US**

Mailing Address

**1832 FOSTER DRIVE  
JACKSONVILLE, FL 32216 US**

**DO NOT WRITE IN THIS SPACE**



07102006 No Chg-P CR2E034 (11/05)

4. FEI Number

**59-2338177**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**HOFFMAN, KAREN ATT  
334 2ND AVE N  
JACKSONVILLE BEACH, FL 32250**

**DO NOT WRITE  
IN THIS SPACE**

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 \$550.00  
Due by September 6, 2006**

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  
**P  
TOLLESON, MARK  
1832 FOSTER DRIVE  
JACKSONVILLE, FL 32216**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

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:**

**Mark Tolleson, CEO**

**9-05-06**

**(904)725-7761**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #