

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J84569 (9)

1. Corporate Name:
V. G. R., INC.

Principal Place of Business
**3561 TIMBERLANE SCHOOL RD.
TALLAHASSEE FL 32312**

Mailing Address
**3561 TIMBERLANE SCHOOL ROAD
TALLAHASSEE FL 3231
US**

**APPROVED
AND
FILED**

MAY -1 PM 2:21

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. State, Apt. # etc.	26. State, Apt. # etc.	07/28/1987	05/01/1994
22. City & State	27. City & State	4. FEI Number	Applied For
23. City & State	28. City & State	59-2842683	☐ Not Applicable
24. City & State	29. City & State	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
25. City & State	30. City & State	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
26. City & State	31. City & State	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes.	☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FITZPATRICK, VALERIE 3561 TIMBERLANE SCHOOL RD. TALLAHASSEE FL 32312	FL 85 Zip Code

11. I, the undersigned, the president or secretary of the corporation, hereby certify that the above named corporation submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the laws of the State of Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995
P NAME: FITZPATRICK, GARY STREET ADDRESS: 5158 INP DE FRANCE DRIVE CITY: TALLAHASSEE FL	☐ Change ☐ Addition
VP NAME: FITZPATRICK, VALERIE STREET ADDRESS: 5158 ILE DE FRANCE DRIVE CITY: TALLAHASSEE FL	☐ Change ☐ Addition
ST NAME: WESSON, ROBIN STREET ADDRESS: 403 E. PARK AVE CITY: TALLAHASSEE FL	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
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	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and disclosed truthfully for the corporation stated in the laws of the State of Florida Statutes. I further certify that the information disclosed on this annual report or supplemental annual 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. Also because of this disclosure, I am required by Chapter 190, Florida Statutes, and that my name appears on the list of officers and directors of the corporation with an address.

SIGNATURE: *Valerie Fitzpatrick*
DIRECTOR AND TYPED ON PHOTOCOPY BY SIGNING OFFICER OR DIRECTOR

4/30/95