# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 02, 2010**
**Secretary of State**

DOCUMENT# L17068

**Entity Name:** VANARSDALE INNOVATIVE PRODUCTS, INC.

**Current Principal Place of Business:**

4660 VOYAGER DRIVE
PENSACOLA, FL 32514 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 19064
PENSACOLA, FL 32523 US

**New Mailing Address:**

**FEI Number: 59-3028650** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VANARSDALE, DONNA M
4650 VOYAGER DR.
PENSACOLA, FL 32514 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: P
Name: VANARSDALE, DONNA M
Address: 4650 VOYAGER DRIVE
City-St-Zip: PENSACOLA, FL 32514 US

Title: S
Name: CAINE, THERESA A
Address: 6915 TEMPLE LANE
City-St-Zip: PENSACOLA, FL 32526 US

Title: T
Name: BARNES, MARY K
Address: 5671 TWIN CREEK CIRCLE
City-St-Zip: PACE, FL 32571 US

I hereby 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 all other like empowered.

SIGNATURE: D VANARSDALE D 03/02/2010

Electronic Signature of Signing Officer or Director Date