

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2001 8:00 am
Secretary of State

07-19-2001 90233 019 ***550.00

DOCUMENT # *L99510*

1. Entity Name

VFR CORPORATION

Principal Place of Business

205 South Ocean Blvd.
 Manalapan, FL 33462

Mailing Address

205 South Ocean Blvd.
 Manalapan, FL 33462

2. Principal Place of Business

6110 North Ocean Boulevard

3. Mailing Address

10172 Linn Station Road

Suite, Apt. #, etc.

Unit 37

Suite, Apt. #, etc.

Suite 200

City & State

Boynton Beach, FL

City & State

Louisville, KY

Zip

33435

Country

USA

Zip

40223

Country

USA

4. FEI Number

65-0215427

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

Gardner, James

205 South Ocean Blvd.
 Manalapan, FL 33462

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DPT
 NAME Gardner, James ☒ Delete
 STREET ADDRESS 205 South Ocean Blvd.
 CITY-ST-ZIP Manalapan, FL 33462

TITLE VPS
 NAME Thurman, Richard ☐ Delete
 STREET ADDRESS 10000 Shelbyville Rd.
 CITY-ST-ZIP Louisville, KY 40223

TITLE D
 NAME Thurman, Richard ☐ Delete
 STREET ADDRESS 10000 Shelbyville Rd.
 CITY-ST-ZIP Louisville, KY 40223

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ~~Asst. Secretary~~ D/PT ☐ Change ☒ Addition
 NAME J.D. Nichols
 STREET ADDRESS 10172 Linn Station Road
 CITY-ST-ZIP Louisville, KY 40223

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Asst. Secretary ☐ Change ☒ Addition
 NAME Susan M. Howard
 STREET ADDRESS 10172 Linn Station Road
 CITY-ST-ZIP Louisville, KY 40223

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Susan M. Howard, Asst. Sec.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/20/01 (502) 426-4800

CR2E034 (11/00)