2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 03, 2008 8:00 am Secretary of State

1. Entity Nan	# N00000007 VNERS ASSOCIATI					90189 039 *** ²			
1107 LINDLEY COVE CIRCLE			Mailing Address 1107 LINDLEY COVE CIRCLE DELAND, FL 32724 US						
Principal Place of Business - No P.O. Box # 3. Mailing Address				·					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02232008 _{CI}	ng-NP	CR2E037 (12/06)	
City & State			City & State			4. FEI Number 59-369724	8	}	pplied For
Zip		Country	Zip	Country		5. Certificate of St	atus Desired	\$8.75 Ad	Iditional
6. Name and Address of Current Registered Agent						7. Name and Add	ress of New Re	gistered Agent	
	AUNZIZI	V0050 7056	INENT	Name					
HOLLAND, NIKKI R V.PRED. マRESIDE/ 1107 LINDLEY COVE CIRCLE DELAND, FL 32724			IDEM I	Street Address		(P.O. Box Number is Not Acceptable)			
, .				City	City Ta Zip Code			de	
								TL	
8. The above the obliga	named entit tions of regist	y submits this statement for tered agent	the purpose of Changing its re	egistered office or	registere	ed agent, or both, in	the State of Flor	ida. I am familiar with	, and accept
SIGNATURE	Signebuyi, typed	Alle Island Alle printed name of registered agent ar	nd title if applicable. (NOTE:	5 I Levi Registered Agent signatur	re required	when reinstating)	2	122/E	8
Filing Fee Is \$61.25 Due by May 1, 2008 9. Election Campaig Trust Fund Contril									
						\$5.00 May Be Added to Fees		ke check payable to ta Department of S	
10.	Due by N	Aay 1, 2008 OFFICERS AND DIRE	Trust Fund Co		IJ	Added to Fees	Florid		itate
10.	Due by N	Nay 1, 2008 OFFICERS AND DIRE VICE PRESTI	Trust Fund Co	ntribution. (IJ	Added to Fees	Florid	ta Department of S	itate
TITLE NAME	PRES-BREES, S	OFFICERS AND DIRE VICE PRESIINATIONES	Trust Fund Co	11. TITLE NAME	IJ	Added to Fees	Florid	S AND DIRECTORS II	N 10
TITLE NAME STREET ADDRESS	PRES- BREES, S	Nay 1, 2008 OFFICERS AND DIRE VICE PRESIDENTIAL JONES GEWOOD DRIVE 17 (Trust Fund Co	11. TITLE NAME STREET ADDRESS	IJ	Added to Fees	Florid	S AND DIRECTORS II	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES- BRE29, S 443 PRIN DELAND,	OFFICERS AND DIRE VICE PRESIINATIONES	Trust Fund Co	11. TITLE NAME	IJ	Added to Fees	Florid	S AND DIRECTORS II	N 10
TITLE NAME STREET ADDRESS	PRES-BREES, S 443 PRIN DELAND, SEC. JONES, N	OFFICERS AND DIRE VICE PRESIDENCES COMMENTS COMM	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	IJ	Added to Fees	Florid	S AND DIRECTORS II	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PRES-BREES, S 443 PRIN DELAND, SEC. JONES, N	OFFICERS AND DIRE VICE PRESIDENTES, GEWOOD DRIVE 17 GEWOOD DRIVE 17 GEWOOD BRIVE BRES, NOTALOAK DR. 443	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	IJ	Added to Fees	Florid	ta Department of S S AND DIRECTORS II Change	N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES-BREES, S 443 PRIN DELAND, SEC. JONES, N	OFFICERS AND DIRE VICE PRESIDENCES COMMENTS COMM	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	IJ	Added to Fees	Florid	ta Department of S S AND DIRECTORS II	State N 10 Addition
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indicated on this report or supplemental report is rue and accurate and tharmy signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an endorse with all growth as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #