## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N02000005188



VICTORI INC.	A TOWNHOUSE CONDOM	v.		~		_			
Principal Place of Business C/O AMERICAN CONDO MGMT. 615 CAPE CORAL PKWY W., #103 CAPE CORAL, FL 33914		Mailing Address C/O AMERICAN CONDO MANAGEMENT, INC. P.O. BOX 100399 CAPE CORAL, FL 33904		C.			1/II 88III <b>1</b> 6141		1811 <b>6</b> 3 <b>8</b> 1 1 <b>84</b> 1
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt.	·	Suite, Apt. #, etc.		-	02062007	Chg-NP	CR2E	037 (12/06)	
City & Stat	de	City & State	<del></del>		4. FEI Number 57-11536	90		<u> </u>	oplied For ot Applicable
Zip	Country	Zìp	Country		5. Certificate of	Status Desired		\$8.75 Add	ditional
	6. Name and Address of Current	Registered Agent			7. Name and Ad	dress of New	Registered		
KASE, SU	SAN		Name						
	CORAL PKWY W	Street		ddress (P	O. Box Number i	s Not Acceptab	le)		
	RAL, FL 33914								
			City				FI	Zip Cod	le
	named entity submits this statement to tions of registered agent.	r the purpose of changing its r	egistered office or	registere	d agent, or both,	in the State of F		_	and accept
ine obliga	tions or registered agent.								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signatu	ra required w	rhan reinstating)		DATE	·	
		MITA Make a apparaturation	110900000190100		ing i or our of	· · · · · · · · · · · · · · · · · · ·			
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	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Cam Trust Fund Co		_ ;	\$5.00 May Be Added to Fees	1		ck payable t entment of S	
10.	Due by May 1, 2007 OFFICERS AND DI	Trust Fund Co	ontribution.	Αξ	\$5.00 May Be Added to Fees DDITIONS/CHAN	Flo	rida Depa	IRECTORS IN	tate
TITLE	OFFICERS AND DIE	Trust Fund Co	ontribution.  11.  TITLE	P	DDITIONS/CHAN	GES TO OFFIC	rida Depa ERS AND D	irtment of S	tate
	Due by May 1, 2007 OFFICERS AND DI	Trust Fund Co	ontribution.	P PLUI	DESTIONS/CHAN	GES TO OFFIC CHARLE VALLEY	ERS AND D	DIRECTORS IN Change	tate
TITLE NAME	PD MCVAUGH, THOMAS 519 BEECH TREE LN HOCKESSIN, DE 19707	Trust Fund Co	11. TITLE NAME	P PLUI	DESTIONS/CHAN	GES TO OFFIC CHARLE VALLEY	ERS AND D	DIRECTORS IN Change	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCVAUGH, THOMAS 519 BEECH TREE LN HOCKESSIN, DE 19707	Trust Fund Co	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P PLUI	DDITIONS/CHAN	GES TO OFFIC CHARLE VALLEY	ERS AND D	DIRECTORS IN Change	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCVAUGH, THOMAS 519 BEECH TREE LN HOCKESSIN, DE 19707	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PLUI	DESTIONS/CHAN	GES TO OFFIC CHARLE VALLEY	ERS AND D	DIRECTORS IN Change	1 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MCVAUGH, THOMAS 519 BEECH TREE LN HOCKESSIN, DE 19707 VD CUZDEY, STEVEN	Trust Fund Co	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	P PLUI	DESTIONS/CHAN	GES TO OFFIC CHARLE VALLEY	ERS AND D	DIRECTORS IN Change	1 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by May 1, 2007  OFFICERS AND DID  PD  MCVAUGH, THOMAS 519 BEECH TREE LN  HOCKESSIN, DE 19707  VD  CUZDEY, STEVEN 2200 CENTURY AVE STE 750  ATLANTA, GA 30345  STD	Trust Fund Co	TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P PLUI	DESTIONS/CHAN	GES TO OFFIC CHARLE VALLEY	ERS AND D	DIRECTORS IN Change	1 10 Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2007  OFFICERS AND DID  PD  MCVAUGH, THOMAS 519 BEECH TREE LN  HOCKESSIN, DE 19707  VD  CUZDEY, STEVEN 2200 CENTURY AVE STE 750  ATLANTA, GA 30345  STD	Trust Fund Co	TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P PLUI	DESTIONS/CHAN	GES TO OFFIC CHARLE VALLEY	ERS AND D	Introduction of State	Addition
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 617, 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.

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Daytane Phone #

**FILED** 

May 03, 2007 8:00 am Secretary of State 05-03-2007 90050 043 \*\*\*\*61.25