

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT #N94000005793

1. Entity Name
PROFNET OF VERO BEACH, INC.



Principal Place of Business

626 3RD PLACE
VERO BEACH, FL 32962

Mailing Address

626 3RD PLACE
VERO BEACH, FL 32962



01182007 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
59-3283760

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RYE, LINDA
C/O 626 3RD PLACE
VERO BEACH, FL 32962

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
RYE, LINDA L
710 17TH AVENUE
VERO BEACH, FL 32962

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRES
STEPHENS, MICHAEL
210 OLD DIXIE
VERO BEACH, FL 32962

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
RYE, LINDA
710 17TH AVE
VERO BEACH, FL 32962

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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.

SIGNATURE:

Linda Rye
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-2007

Date

Daytime Phone #

772-569-
2120