

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000106353

FILED  
Apr 28, 2002 8:00 AM  
Secretary of State

Entity Name: C.V.C., INC.

## Current Principal Place of Business:

6765 NORTH WICKHAM RD.  
C105  
MELBOURNE, FL 32940

## New Principal Place of Business:

348 PROVINCIAL DRIVE  
INDIALANTIC, FL 32903

## Current Mailing Address:

6765 NORTH WICKHAM RD.  
C105  
MELBOURNE, FL 32940

## New Mailing Address:

348 PROVINCIAL DRIVE  
INDIALANTIC, FL 32903

FEI Number: 59-1361212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VAKOS, MARINA K  
348 PROVINCIAL DR  
INDIALANTIC, FL 32903

## Name and Address of New Registered Agent:

VAKOS, MARINA R  
348 PROVINCIAL DRIVE  
INDIALANTIC, FL 32903

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: MARINA R. VAKOS

04/28/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: VAKOS, MARINA R  
Address: 348 PROVINCIAL DR  
City-St-Zip: INDIALANTIC, FL 32903

Title: D ( ) Delete  
Name: CHRISTIANSON, PATRICIA J  
Address: 346 PROVINCIAL DR  
City-St-Zip: INDIALANTIC, FL 32903

Title: D ( ) Delete  
Name: CHRISTIANSON, PAUL L  
Address: 346 PROVINCIAL DR  
City-St-Zip: INDIALANTIC, FL 32903

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARINA R. VAKOS

PRES

04/28/2002

Electronic Signature of Signing Officer or Director

Date