

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000020345

Entity Name: VALUE CARD CO.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

3100 SW COLLEGE RD
STE 214
OCALA, FL 33474

New Principal Place of Business:

4949 SW 41ST BLVD
STE 60
GAINESVILLE, FL 32608

Current Mailing Address:

4949 SW 41ST BLVD.
STE 60
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3701265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSS, GEORGE
907 WEBSTER ST
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: GAMBLE, BRENT K
Address: 3100 SW COLLEGE RD, STE 214
City-St-Zip: Ocala, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: GAMBLE, BRENT K
Address: 4949 SW 41ST BLVD #60
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BRENT GAMBLE

PSTD

03/23/2009

Electronic Signature of Signing Officer or Director

_____ Date