

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000032966

Entity Name: V.E. LUND, CORP.

FILED  
Apr 21, 2006  
Secretary of State

## Current Principal Place of Business:

P. O. BOX 387, HWY. 259  
WACISSA, FL 32361

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 387, HWY. 259  
WACISSA, FL 32361

## New Mailing Address:

FEI Number: 59-3712125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LUND, VICTORIA E  
1407 MD LANE, SUITE B  
TALLAHASSEE, FL 32308 US

## Name and Address of New Registered Agent:

LUND, VICTORIA E  
857 TRAM ROAD  
WACISSA, FL 32361 US

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

04/21/2006

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DR ( ) Delete  
Name: LUND, VICTORIA E  
Address: P. O. BOX 387, HWY. 259  
City-St-Zip: WACISSA, FL 32361

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: VICTORIA E LUND

Electronic Signature of Signing Officer or Director

DR.

04/21/2006

Date