

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000032966

Entity Name: V.E. LUND, CORP.

**FILED**  
**Jan 20, 2010**  
**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 ( )

**Name and Address of Current Registered Agent:**

LUND, VICTORIA E DR.  
857 TRAM ROAD  
WACISSA, FL 32361 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: DR  
Name: LUND, VICTORIA E  
Address: P. O. BOX 387, HWY. 259  
City-St-Zip: WACISSA, FL 32361

I hereby 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 all other like empowered.

SIGNATURE: VICTORIA E LUND

CEO

01/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date