


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 30, 2008 8:00 am**  
**Secretary of State**

01-30-2008 90028 016 \*\*\*150.00

DOCUMENT # P02000007750			
1. Entity Name V.C. STEELE INC.			
Principal Place of Business 401 VINE AVENUE CLEARWATER, FL 33755 US		Mailing Address PO BOX 1317 CLEARWATER, FL 33757 US	
2. Principal Place of Business - No P.O. Box # 820 Pinellas st		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Clearwater FL		City & State	
Zip 33756	Country USA	Zip	Country
6. Name and Address of Current Registered Agent STEELE, CHARLES F 401 VINE AVENUE CLEARWATER, FL 33755		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 820 Pinellas St City Clearwater FL Zip Code 33756	
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD STEELE, VANESSA L 401 VINE AVENUE CLEARWATER, FL 33755 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 820 Pinellas St Clearwater FL 33756
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVD STEELE, CHARLES F 401 VINE AVENUE CLEARWATER, FL 33755 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 820 Pinellas St Clearwater FL 33756
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 607, 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: <u>Vanessa L Steele</u>		1/12/08 727 644 9006	
SIGNATURE		DATE	