

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Sep 06, 2005 08:00 AM
Secretary of State**

DOCUMENT # P02000009567

1. Entity Name
D.G.V.P., INC.



Principal Place of Business

**500 N. OLEANDER AVE.
DAYTONA BEACH, FL 32118**

Mailing Address

**500 N. OLEANDER AVE.
DAYTONA BEACH, FL 32118**

DO NOT WRITE IN THIS SPACE



06302005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2665691

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DOLINER, JEROME N
500 N. OLEANDER AVE.
DAYTONA BEACH, FL 32118**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT
NAME DOLINER, JEROME
STREET ADDRESS 500 NORTH OLEANDER AVE
CITY-ST-ZIP DAYTONA BEACH, FL 32118

TITLE VPS
NAME GEORGE, NICHOLAS A
STREET ADDRESS 500 NORTH OLEANDER AVE
CITY-ST-ZIP DAYTONA BEACH, FL 32118

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000377735
09/07/05-80010-005 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Nicholas A. George

Nicholas A. George

8/29/05 (386) 253-1697

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #