## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 02, 2003 8:00 am Secretary of State 05-02-2003 90740 024 \*\*\*150.00

DOCUMENT # P02000114635			05-02-2003 90740 024 ***150.00	
1. Entity Name VILCO 18, INC.				
VILCO 10, INC.		1	ł	
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DO NOT WRITE IN THIS SPACE			90123027	
			aucaluc	•
			₫	
2. Principal Place of Business	3. Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
1200 MAIN STREET	P.O. BOX 27	59		
City & State FT. MYERS BEACH,	City & State FL FT. MYERS B	EACH, FL	4. FEI Number 03-0489120	Applied For Not Applicable
Zip Country	Zip	Country		8.75 Additional
33931 US	33932-2759			ee Required
DO NOT WRIT	E IN THIS SPACE	Name	7. Name and Address of Current Registered	Agent
		VILLERS		
•		Street Address	(P.O. Box Number is Not Acceptable)	
		,		
•	•	City		Zip Code
		FT. MYE	RS BEACH, FL	Zip Code 33931
The above named entity submits the and accept the obligations of regist		ng its registered office or r	egistered agent, or both, in the State of Florida	. I am familiar with,
SIGNATURE Signature, typed or printed r	name of registered agent and title if applicable	e. (NOTE: Registered A	gent signature required when reinstating)	DATE
January 1 - May 1 Fee is \$			S. Floation Comparing Financian	\$5.00 May Be
After May 1, Fee is \$550 Amended UBR is \$61.		ı	Election Campaign Financing     Trust Fund Contribution.	Added to Fees
Make Check Payable to Florida Dep				
10. OFFIC	ERS AND DIRECTORS	TITLE	<del></del>	
NAME VILLERS, J	OSEPH A.	NAME		
STREET ADDRESS 1200 MAIN	STREET	STREET ADDRESS		·
CITY-ST-ZIP FT. MYERS	BEACH, FL 33931		<del></del>	
TITLE NAME		TITLE NAME	ŧ	
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TITLE NAME		TITLE NAME		1
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information indicated on this report an officer or director of the corporat	or supplemental report is true and accu	urate and that my signatured to execute this report as	in Section 119.07(3)(i). Florida Statutes. I furthe e shall have the same legal effect as if made ui s required by Chapter 607, Florida Statutes; and	nder oath; that I am
SIGNATURE:	AA HALLA	OSEPH A. VI	<u>LLERS   4/29/</u> 03 (239	) 463-7000
	D TYPED OR PRINTED NAME OF SIGNIN		1 Date Daytime P	