

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000114768			
1. Entity Name VILCO 5, INC.			
Principal Place of Business 1200 MAIN ST. FT. MYERS BEACH, FL 33931		Mailing Address PO BOX 2759 FORT MYERS BEACH, FL 33932-2759	
DO NOT WRITE IN THIS SPACE			
		03142006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 03-0488938	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fees Required	
6. Name and Address of Current Registered Agent VILLERS, JOSEPH A 1200 MAIN ST. FT. MYERS BEACH, FL 33931		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		DATE _____ <small>(NOTE: Registered Agent signature required when reappointing)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000515005 04/29/06-80195-002 150.00
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST VILLERS, JOSEPH A 1200 MAIN ST. FT. MYERS BEACH, FL 33931		
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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:  _____		JOSEPH A VILLERS 3/15/06 (239) 463-7000	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	