

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000008344

1. Entity Name
VESTMARK CORP.



FILED

04 OCT 27 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09302004 Chg-P CR2E034 (10/03)

Principal Place of Business
**1923 VALE DR
CLEREMONT, FL 34711 US**

Mailing Address
**1923 VALE DR
CLEREMONT, FL 34711 US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country

4. FEI Number
42-1573902

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**CARVER, MARK J
1923 VALE DR
CLEREMONT, FL 34711**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 \$550.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARVER, MARK J 1923 VALE DR. CLEREMONT, FL 34711	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	vice-president Richard Carver 19 Church St. Wales, MA 01081	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

REINSTATEMENT

Handwritten signature and date 11/10/04

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: *Mark Carver* 10-01-04 352-394-6268
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2012

To Whom It May Concern,

We were never informed of the \$400.00 late fee imposed for late filing. I did make note on your online service that we had not been informed. After speaking with one of your representatives on the phone on Friday October 22, 2004 I was told that this letter would be enough to waive the late fee and have the corporation reinstated as soon as possible. If you have any questions, we may be reached at the following numbers.

352-394-6268 407-929-6426 407-929-5833

Thank you,

A handwritten signature in black ink, appearing to read 'Mark Carver', with a long horizontal flourish extending to the right.

Mark Carver
President Vestmark Corp.