2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000018383

1. Entity Name
VICTORIA STATION, INC.

Principal Place of Business	Mailing Address
1177 MAIN STREET, SUITE C DUNEDINA, FL 34698	P.O. BOX 1705 DUNEDIN, FL 34697

U00000577284
01/08/07-80010-011 150.00

01042007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
03-0508026	Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GEORGE, THOMAS E
2682 CRYSTAL CIR
DUNEDIN, FL 34698

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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GEORGE, THOMAS E
STREET ADDRESS	1177 MAIN STREET SUITE C
CITY-ST-ZIP	DUNEDIN, FL 34698
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____   1/5/07   727 430-0050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #