

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2005 8:00 am
Secretary of State

06-09-2005 90002 043 ***150.00

DOCUMENT # P03000039574 1. Entity Name V & I MAINTENANCE CORP.																											
Principal Place of Business 4405 S.W. 35TH TERR. GAINESVILLE, FL 32608		Mailing Address P.O. BOX 141901 GAINESVILLE, FL 32614																									
2. Principal Place of Business ONE ALLTEL STADIUM PLACE Suite, Apt. #, etc.		3. Mailing Address 1832 FOSTER DRIVE Suite, Apt. #, etc.																									
City & State JACKSONVILLE, FL Zip 32202 Country USA		City & State JACKSONVILLE, FL Zip 32216 Country USA																									
4. FEI Number 32-0064998		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent GLAZIER & GLAZIER, P.A. 8025 PERIMETER PARK BLVD., STE. 504 JACKSONVILLE, FL 32216		7. Name and Address of New Registered Agent Name KAREN HOFFMAN, ATTORNEY AT LAW Street Address (P.O. Box Number is Not Acceptable) 334 2ND AVE. N City JACKSONVILLE BEACH FL Zip Code 32250																									
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 <u><i>Karen C Hoffman</i></u> DATE <u>6/7/05</u> <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;">D</td> <td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/> Delete</td> <td style="width: 70%;">NAME STROHECKER, LARRY G</td> </tr> <tr> <td colspan="4">STREET ADDRESS 1764 LIVE OAK LANE</td> </tr> <tr> <td colspan="4">CITY - ST - ZIP ATLANTIC BEACH, FL 32233</td> </tr> </table>		TITLE	D	<input checked="" type="checkbox"/> Delete	NAME STROHECKER, LARRY G	STREET ADDRESS 1764 LIVE OAK LANE				CITY - ST - ZIP ATLANTIC BEACH, FL 32233				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;"></td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> <td style="width: 70%;">NAME PRESIDENT MARK TOLLESON</td> </tr> <tr> <td colspan="4">STREET ADDRESS 1832 FOSTER DR</td> </tr> <tr> <td colspan="4">CITY - ST - ZIP JACKSONVILLE, FL 32216</td> </tr> </table>		TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME PRESIDENT MARK TOLLESON	STREET ADDRESS 1832 FOSTER DR				CITY - ST - ZIP JACKSONVILLE, FL 32216			
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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: <u><i>Mark Tolleason</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>5/7/05</u> Daytime Phone # <u>904-725-0440</u>																									