## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000051539

Entity Name: VHK, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5115 CLARENDON RD. 6579 IMMOKALEE RD

JACKSONVILLE, FL 32205 US KEYSTONE HEIGHTS, FL 32656 US

Current Mailing Address: New Mailing Address:

5115 CLARENDON RD. 6579 IMMOKALEE RD

JACKSONVILLE, FL 32205 US KEYSTONE HEIGHTS, FL 32656 US

FEI Number: 33-1056952 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KATZ, SHERMAN PRES KATZ, SHERMAN PRES 5115 CLARENDON RD 6579 IMMOKALEE RD.

JACKSONVILLE, FL 32205 US KEYSTONE HEIGHTS, FL 32656 US

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.

SIGNATURE: 04/14/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 KATZ, SHERMAN
 Name:
 KATZ, SHERMAN

 Address:
 5115 CLARENDON RD
 Address:
 6579 IMMOKALEE RD

City-St-Zip: JACKSONVILLE, FL 32205 US City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: VPST ( ) Delete Title: VPST (X) Change ( ) Addition

 Name:
 KATZ, VIVIAN H
 Name:
 KATZ, VIVIAN H

 Address:
 5115 CLARENDON RD.
 Address:
 6579 IMMOKALEE RD

City-St-Zip: JACKSONVILLE, FL 32205 US City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERMAN KATZ PRES 04/14/2009

Electronic Signature of Signing Officer or Director

Date