

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jun 03, 2004 8:00 am**  
**Secretary of State**

06-03-2004 90004 049 \*\*\*150.00

**DOCUMENT # P03000077641**

1. Entity Name

V HOMES, INC.



Principal Place of Business

37322 NEW YORK AVE  
DONA VISTA FL 32784

Mailing Address

P.O. BOX 74  
EUSTIS FL 32727-0074

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

350838849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VANIER, ROYSTON  
37322 NEW YORK AVE  
DONA VISTA FL 32784

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 *Royston Vanier*

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, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME VANIER, ROYSTON P  
STREET ADDRESS 37322 NEW YORK AVE  
CITY-ST-ZIP DONA VISTA FL 32784

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD ☐ Delete  
NAME VANIER, DEBBIE R  
STREET ADDRESS 37322 NEW YORK AVE  
CITY-ST-ZIP DONA VISTA FL 32784

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *Debbie Vanier*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-31-04 3525891016

Date

Daytime Phone #

Attachment 534056552

#PO 3000077641

May 31, 2004

To Whom It May Concern:

I am enclosing the \$150.00 filing fee. I received this billing from you on May 21, 2004.

I saw the notice to pay \$550.00 after May 1, 2004, however I didn't get the billing until the 21<sup>st</sup> of May. I didn't know that on May 1<sup>st</sup> I had a bill due to you or I would have paid it before then. Enclosed you will find my payment. I pay my bills, and again had I known that I had a bill due on the 1<sup>st</sup> of May, I would have paid it. I did not receive it until May 21, 2004, in the condition I return it to you.

Thank you,

  
Debbie Vanier