## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P03000106748**

1. Entity Name V.F.S., INC.



**FILED** Feb 22, 2007 08:00 A Secretary of State

Principal Place of Business

5203 SORRENTO CT LAKELAND, FL 33813 Mailing Address

5203 SORRENTO CT LAKELAND, FL 33813



02142007

No Chg-P

CR2E034 (11/05)

4. FEI Number 52-2409461 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

STRAWBRIDGE, VINCENT F SR 5203 SOPPENTO CT

## DO NOT WRITE

LAKELAND, FL 33813				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 take if applicable (NOTE: Registered Agent signature required when reinstating)				DATE	
FiL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Hection Gampaign Hina Trust Fund Contribution		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	TVL COM		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRAWBRIDGE, VINCENT F SR 5203 SORRENTO CT LAKELAND, FL 33813				
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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, Elorida 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.