


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Feb 08, 2007 08:00 A**  
**SECRETARY OF STATE**  
**SCAN**

DOCUMENT # P03000140750  
 1. Entity Name  
 VFW DEVELOPMENT & PROPERTIES INC.



Principal Place of Business      Mailing Address  
 1815 TURNER WOOD LANE      1815 TURNER WOOD LANE  
 PANAMA CITY BEACH, FL 32407      PANAMA CITY BEACH, FL 32407

**DO NOT WRITE IN THIS SPACE**



01082007    No Chg-P    CR2E034 (11/05)

4. FEI Number 20-0441988	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 WOOD, FRANK JR  
 1815 TURNER WOOD LANE  
 PANAMA CITY BEACH, FL 32407

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

**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

DATE  
 02/15/07-80059-019 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOOD, FRANK JR 1815 TURNER WOOD LANE PANAMA CITY BEACH, FL 32407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WOOD, VALORIE 1815 TURNER WOOD LANE PANAMA CITY BEACH, FL 32407
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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, 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: Frank Wood      Date: 1-9-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Daytime Phone #