2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0400000276

Title:

Name:

Address:

City-St-Zip:

TR/S

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568 NINTH STREET SOUTH, PMB

REYNOLDS, MICHELLE D

NAPLES, FL 34102

FILED Apr 22, 2004 Secretary of State

Entity Nam	ne: VCI MARK	ETING CO					
Current Principal Place of Business:				New Principal Place of Business:			
851 FIFTH AVENUE NORTH SUITE 305 NAPLES, FL 34102				851 FIFTH AVENUE NORTH SUITE 305 NAPLES, FL 34102 US			
Current Mailing Address:				New Mailing Address:			
568 NINTH STREET SOUTH PMB 355 NAPLES, FL 34102				568 NINTH STREET SOUTH PMB 355 NAPLES, FL 34102 US			
FEI Number:	56-2430566	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of	Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
SUITE 305 NAPLES, F	AVE NORTH LORIDA, FL 3 named entity s	4102 US ubmits this statement for the	purpose o	f changing it	s registere	d office or regist	tered agent, or both,
SIGNATUR							
Electronic Signature of Registered Agent				Date			
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	YOUNG, DAVID	EET SOUTH, PMB 355		Title: Name: Address: City-St-Zip:		() Change () Ad	ldition
Title: Name: Address: City-St-Zip:	COMER, JAKE	EET SOUTH, PMB		Title: Name: Address: City-St-Zip:		(X) Change () Ac R, KRISTEN R STREET SOUTH, P L 34102	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DAVID F. YOUNG Ρ 04/22/2004

(X) Change $\ (\)$ Addition

568 NINTH STREET SOUTH, PMB 335

LIGON-THOMAS, LACEY

NAPLES, FL 34102