

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013586

FILED
Jul 01, 2005
Secretary of State

Entity Name: MVW, INC.

Current Principal Place of Business:

1074 BANNERMAN RD
ATALLAHASSEE, FL 32312

New Principal Place of Business:

66 INDUSTRIAL CT
FREEPORT, FL 32439

Current Mailing Address:

1074 BANNERMAN RD
ATALLAHASSEE, FL 32312

New Mailing Address:

66 INDUSTRIAL CT
FREEPORT, FL 32439

FEI Number: 20-0642451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOUNT, MICHAEL
1074 BANNERMAN RD
ATALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLOUNT, VICTORIA H
Address: 2126 SIGMA PIT RD
City-St-Zip: COLUMBIA, AL 36319

Title: T () Delete
Name: BLOUNT, THOMAS W
Address: 2126 SIGMA PIT RD
City-St-Zip: COLUMBIA, AL 36319

Title: V () Delete
Name: BLOUNT, MICHAEL W
Address: 1074 BANNERMAN RD
City-St-Zip: ATALLAHASSEE, FL 32312

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLOUNT, VICTORIA H
Address: 158 E SHIPWRECK RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T (X) Change () Addition
Name: BLOUNT, THOMAS W
Address: 158 E SHIPWRECK RD
City-St-Zip: FREEPORT, FL 32459

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: BLOUNT, GARY T
Address: 158 E SHIPWRECK RD
City-St-Zip: SANTA ROSA BEACH, FL 32459

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.

SIGNATURE: VICTORIA H BLOUNT

PRES

07/01/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date