

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2006 8:00 am
Secretary of State

08-28-2006 90003 001 ***150.00

DOCUMENT # P05000159360

1. Entity Name
VWI HOLDINGS, INC.



Principal Place of Business
**1306 FOURTH AVENUE
TAMPA, FL 33605**

Mailing Address
**P.O. BOX 5738
TAMPA, FL 33675**

50026550



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07252006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

20-4117711

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**BEYER, DAVID A
C/O DLA PIPER RUDNICK GRAY CARY US LLP
101 EAST KENNEDY BOULEVARD, SUITE 2000
TAMPA, FL 33602**

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

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
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **FERRIS, MICHAEL**
STREET ADDRESS **1013 APOLLO BEACH BOULEVARD #5**
CITY-ST-ZIP **APOLLO BEACH, FL 33572**

TITLE **CEO** ☒ Change ☐ Addition
NAME **1322 Emerald Hill Way**
STREET ADDRESS **Valrico, FL 33594**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **MAGRISIO, DAVID J**
STREET ADDRESS **920 CORAL STREET**
CITY-ST-ZIP **TAMPA, FL 33602**

TITLE **VP Regional Sales** ☒ Change ☐ Addition
NAME **MAGRISIO, DAVID J**
STREET ADDRESS **11515 Perfect Place**
CITY-ST-ZIP **Tampa, FL 33626**

TITLE **D** ☐ Delete
NAME **SMITH, BRENT R**
STREET ADDRESS **3225 BASEBALL POND ROAD**
CITY-ST-ZIP **BROOKSVILLE, FL 34602**

TITLE **COO** ☐ 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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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
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 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: **Michael Ferris** **CEO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-11-06
Date

Daytime Phone #