# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Sep 04, 2009**
**Secretary of State**

DOCUMENT# P07000101614

**Entity Name:** VMA MANAGEMENT INC

**Current Principal Place of Business:**

1065 MARTIN BLVD
ORLANDO, FL 32825

**New Principal Place of Business:**

2112 SPICE AVE
ORLANDO, FL 32837

**Current Mailing Address:**

1065 MARTIN BLVD
ORLANDO, FL 32825

**New Mailing Address:**

2112 SPICE AVE
ORLANDO, FL 32837

**FEI Number: 33-1205595** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANDREWS, VARINA MARI
1065 MARTIN BLVD
ORLANDO, FL 32825 US

**Name and Address of New Registered Agent:**

ANDREWS, VARINA MARI
2112 SPICE AVE
ORLANDO, FL 32837 US

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: VARINA ANDREWS 09/04/2009
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: PST ( ) Delete
Name: ANDREWS, VARINA MARI
Address: 1065 MARTIN BLVD
City-St-Zip: ORLANDO, FL 32825

Title: V ( ) Delete
Name: STROUD, BARBARA
Address: 5432 55TH AVE N
City-St-Zip: ST PETERSBURG, FL 33709

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition
Name: ANDREWS, VARINA MARI
Address: 2112 SPICE AVE
City-St-Zip: ORLANDO, FL 32837

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: VARINA ANDREWS P 09/04/2009
Electronic Signature of Signing Officer or Director Date