

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000010593

Entity Name: MVA ASSOCIATES, INC.

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6235 CAPSTAN COURT  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

6235 CAPSTAN COURT  
ROCKLEDGE, FL

**New Mailing Address:**

FEI Number: 68-0671014

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VITORIA, MANUEL V  
6235 CAPSTAN COURT  
ROCKLEDGE, FL 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: VITORIA, MANUEL V  
Address: 6235 CAPSTAN COURT  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: V PR  
Name: VITORIA, JANET P  
Address: 6235 CAPSTAN COURT  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: SEC  
Name: VITORIA, JANET P  
Address: 6235 CAPSTAN COURT  
City-St-Zip: ROCKLEDGE, FL 32955 US

I hereby 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 all other like empowered.

SIGNATURE: JANET P. VITORIA

V PR

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date