## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P09000043181

Entity Name: VEHLTOR, INC.

**FILED** Apr 29, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

415 N. MAGNOLIA AVENUE 303 SE 17TH STREET #309 OCALA, FL 34475

SUITE 222

OCALA, FL 34471

**Current Mailing Address: New Mailing Address:** 

303 SE 17TH STREET #309 SUITE 222 OCALA, FL 34471 US

FEI Number: 27-0211448 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BURKE, HOWARD T 303 SE 17 STREET #309 SUITE 222 OCALA, FL 34471 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

BURKE, HOWARD T Name:

303 SE 17 STREET, #309 SUITE 222 Address:

City-St-Zip: OCALA, FL 34471 US

Title: **EVP** 

Name: LAMBS, FREDERICK J

303 SE 17 STREET, #309 SUITE 222 Address:

OCALA, FL 34471 US City-St-Zip:

Title:

HEMENWAY, THOMAS Name: 1904 N. PINE AVENUE Address: City-St-Zip: OCALA, FL 34475

Title: VΡ

LECLERC, MARC Name: Address: 1289 GALE DRIVE City-St-Zip: KENT, OH 44204

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.

Ρ SIGNATURE: HOWARD T BURKE 04/29/2012