

PO9000056019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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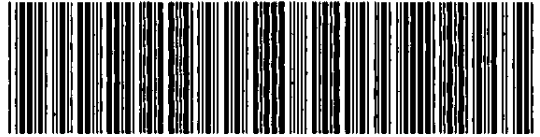
(Business Entity Name)

(Document Number)

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10 MAR 22 PM 3:45

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 14, 2009

DONNA VAUGHN  
2262 SE FLANDERS ROAD  
PORT ST. LUCIE, FL 34984

SUBJECT: VINCENT MICHAEL PRODUCTIONS, INC.  
Ref. Number: P09000056019

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell  
Regulatory Specialist II

Letter Number: 609A00032990

RECEIVED  
2010 MAR 22 AM 8:00  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Vincent Michael Productions, Inc.  
Name of Corporation

DOCUMENT NUMBER: P09000056019

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donna Vaughn  
Name of Contact Person

starchartsvideo.com  
Firm/Company

2262 SE Flanders Rd.  
Address

PS 2, FL 34952  
City/State and Zip Code

Donna K Vaughn @ Comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Vaughn at (561) 578-4368  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Vincent Michael Productions, Inc.  
2. The principal office address: 622 SE Norseman Dr  
PSL FL 34984  
3. The mailing address (if different): 2262 SE Flanders Rd  
PSL, FL 34952  
4. Date of incorporation/qualification: 6/30/09 Document number: P09800056019  
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  
Donna Vaughn  
2262 SE FLANDERS RD.  
PT. SAINT LUCIE, FL 34952

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Ann Licata  
2262 SE Flanders Rd  
PSL, FL 34952  
P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Donna Vaughn Donna Vaughn V.P  
Signature of an officer or director Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Ann Licata  
Signature of Registered Agent

3/12/10  
Date

If signing on behalf of an entity:

Ann Licata  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314