

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000100815

Entity Name: STRATVUE SPV, INC.

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

26140 HICKORY BLVD.  
801  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

**Current Mailing Address:**

26140 HICKORY BLVD.  
801  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

FEI Number: 45-1579030

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHILDRESS, ROBERT  
827 OAK SHADOWS ROAD  
CELEBRATION, FL 34747 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BEWLEY, WILLIAM  
Address: 26140 HICKORY BLVD, UNIT 801  
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: VP/S  
Name: BYRNE, CHRISTOPHER  
Address: 5821 MAGNOLIA LANE  
City-St-Zip: FALLS CHURCH, VA 22041 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: WILLIAM BEWLEY

P

03/19/2012

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

\_\_\_\_\_  
Date