

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 14, 2003 8:00 am**  
**Secretary of State**

05-14-2003 90140 002 \*\*\*150.00

**DOCUMENT # P94000012462**

**1. Entity Name**  
**VILLAGE WAGON, INC.**



**Principal Place of Business**  
**VILLAGE WAGON, INC**  
**292 BERN ST**  
**PT ORANGE FL 32127**

**Mailing Address**  
**292 BERN ST**  
**PT. ORANGE FL 32127**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number**

**59-3234153**

Applied For

Not Applicable

**5. Certificate of Status Desired**

☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**PIASECKI, EDMUND J III**  
**292 BERN ST**  
**PORT ORANGE FL 32127**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**8. 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. I am familiar with, and accept the obligations of registered agent.**

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

*May 07, 03*

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing  
Trust Fund Contribution.**

☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE ☐ Delete  
NAME **PIASECKI, EDMUND J III**  
STREET ADDRESS **292 BERN ST**  
CITY-ST-ZIP **PT ORANGE FL 32127**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*May 7, 03* **1386**  
**679-8857**

CR2E034 (10/02)



90134600

YOUR MONEY MATTERS, INC.

Penny Parr, E.A.  
375 Spring Forest Drive  
New Smyrna Beach, FL 32168  
(386) 409-8942  
E-Mail: YrMoneyMat@hotmail.com

May 10, 2003

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee FL 32302-1500

Subject: **Village Wagon, Inc.**  
**Document # P94000012462**

Dear Florida Division of Corporations:

As per my conversation with your office on May 9, 2003, we are requesting a waiver of the additional fee for filing this Uniform Business Report late, due to extenuating circumstances. Mr. Piasecki's mother, whom resides with Mr. Piasecki, has been very ill and required most of his attention and concerns over the last few months. - He just realized this report was late and is very concerned over this matter. The Village Wagon, Inc. has a long history of filing timely and will make sure this does not happen again.

Thank you for your understanding and cooperation in this matter. If you have any questions or require any additional information, please contact me at 386-547-1623.  
Thank you for your business.

Sincerely yours,

Penelope Parr, E.A.  
Accountant