

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000009870

1. Entity Name
VIBBER VINYL, INC.



Principal Place of Business
**P.O. BOX 431
LADY LAKE, FL 32158**

Mailing Address
**206 N 3RD ST.
LEESBURG, FL 34748**



02012006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3294707

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**VIBBER, SALLY S
206 N 3RD STREET
LEESBURG, FL 34748**

**DO NOT WRITE
IN THIS SPACE**

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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	VIBBER, SALLY S
STREET ADDRESS	PO BOX 431
CITY-ST-ZIP	LADY LAKE, FL 32158
TITLE	V
NAME	VIBBER, STEVEN N
STREET ADDRESS	PO BOX 431
CITY-ST-ZIP	LADY LAKE, FL 32158
TITLE	ST
NAME	VIBBER, WILLIAM J
STREET ADDRESS	PO BOX 431
CITY-ST-ZIP	LADY LAKE, FL 32158
TITLE	V
NAME	JANS, RICHARD C
STREET ADDRESS	PO BOX 1070
CITY-ST-ZIP	TAVARES, FL 32778
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000423510
02/22/06-80010-012 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Sally S. Vibber Sally S. Vibber 2-8-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #