2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

Mar 06, 2002 8:00 am Secretary of State DOCUMENT # P95000014118 1. Entity Name 03-06-2002 90137 042 ***150.00 VI-ANN, INC. Principal Place of Business Mailing Address 1103 E. ALTAMONTE DRIVE 1103 E. ALTAMONTE DRIVE ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS FL 32701 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1423710 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERR, ORVILLE G Street Address (P.O. Box Number is Not Acceptable) 1103 E. ALTAMONTE DRIVE ALTAMONTE SPRINGS FL 32701 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered and not purpose of changing its registered office or registered and not purpose of changing its registered office or registered and not purpose of changing its registered office or registered and not purpose of changing its registered office or registered and not purpose of changing its registered office or registered and not purpose of changing its registered office or registered and not purpose of changing its registered office or registered and not purpose of changing its registered office or registered and not purpose of changing its registered office. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete CR2E034 (9/01) TITLE ☐ Addition ☐ Change NAME HERR, MARTHA E NAME STREET ADDRESS 1103 E. ALTAMONTE DRIVE STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701 CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME HERR, ORVILLE G NAME STREET ADDRESS 1103 E. ALTAMONTE DRIVE STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 11 or Block 12 if

FILED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO