

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90168 032 ***150.00

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DOCUMENT # P95000042073

1. Entity Name
VALERIE'S COLLECTIBLES, INC.



Principal Place of Business
348 NORTH PARK AVENUE
WINTER PARK FL 32789

Mailing Address
348 NORTH PARK AVENUE
WINTER PARK FL 32789



2. Principal Place of Business
352 N. Park Ave.
Suite, Apt. #, etc.

3. Mailing Address
352 N. Park Ave.
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Winter Park, FL

City & State
Winter Park, FL

4. FEI Number 59-3315443

Applied For
Not Applicable

Zip 32789 Country ORANGE

Zip 32789 Country ORANGE

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

6. Name and Address of Current Registered Agent

EVERETT, ADELAIDA U
511 MEADOWVALE DR
ORLANDO FL 32825

7. Name and Address of New Registered Agent

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

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

TITLE P
NAME LINVILLE, VALERIE L
STREET ADDRESS 988 TILLERY WAY
CITY-ST-ZIP ORLANDO FL 32828 ☐ Delete

TITLE ST
NAME EVERETT, MARIAN G
STREET ADDRESS 511 MEADOW VALE DR
CITY-ST-ZIP ORLANDO FL 32825 ☐ Delete

TITLE C
NAME LIMANDAP, DOROTEO V.
STREET ADDRESS 718 KINGS COVE
CITY-ST-ZIP ORLANDO FL 32807 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

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:

Adelaida U. Everett EVERETT, ADELAIDA U. April 4-20-03 407-207-6200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)