

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90050 034 ***150.00

DOCUMENT # P95000094258

1. Entity Name
VALENCIA CORPORATION OF BRADENTON



Principal Place of Business
**3500 EL CONQUISTADOR PKWY
242
BRADENTON, FL 34210 US**

Mailing Address
**2400 WALLACE AVE
260
SARASOTA, FL 34237 US**

2. Principal Place of Business

3. Mailing Address
100 WALLACE AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

-260-

City & State

City & State
SARASOTA, FL

Zip

Country

Zip
34237

Country
USA

01092006

Chg-P

CR2E034 (11/05)

4. FEI Number
65-0630854

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**AVERY, JOSEPH H JR.
3500 EL CONQUISTADOR PKWY
#242
BRADENTON, FL 34210**

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, 2006 Fee will be \$550.00**

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
NAME
STREET ADDRESS
CITY - ST - ZIP
**DPST
AVERY, JOSEPH H JR.
3500 EL CONQUISTADOR PKWY #242
BRADENTON, FL 34210** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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

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: *Joseph Avery*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JOSEPH AVERY
PRESIDENT**

Date

Daytime Phone #

X 01/18/06