2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000100748

Entity Name: VALRICO INVESTMENT PROPERTIES INC

FILED Apr 06, 2009 Secretary of State

Littly Na	IIIE. VALKIO	JIIVESTVILINI FROFERTIL	_3 INC.			
Current P	rincipal Plac	e of Business:	New Prince	New Principal Place of Business:		
230 SKYW VALRICO,	/OOD DR. FL 33594					
Current M	lailing Addre	ss:	New Mail	New Mailing Address:		
	FICE BOX 229 FL 33595229					
FEI Number	: 59-3414874	FEI Number Applied For()	FEI Number Not App	licable () Ce	ertificate of Status Desired()	
Name and	Address of	Current Registered Agent:	Name and	Address of New	Registered Agent:	
230 SKYW	, WAYNE SR /OOD DR FL 33594	US				
	named entity e of Florida.	submits this statement for the	e purpose of changing	its registered office	e or registered agent, or both	
SIGNATUI	RE:					
	Electro	nic Signature of Registered A	gent		Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().				
OFFICER	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name:	STANLEY, WA 230 SKYWOO VALRICO, FL	D DR. 33594) Delete	Title: Name: Address: City-St-Zip: Title: Name:	STANLEY, WAYNE 230 SKYWOOD DR VALRICO, FL 3359	₹.	
Address: City-St-Zip:	6115 KRACKE GIBSONTON,	ER AVE	Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	D (SANTINI, HELI 1909 LIDO DR BRANDON, FL	2	Title: Name: Address: City-St-Zip:	D (X) Chr SANTINI, HELEN L 230 SKYWOOD DR VALRICO, FL 3359		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: Citv-St-Zip:	D () Cha STANLEY, WAYNE 6115 KRACKER AV GIBSONTON, FL 3	Œ	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE A. STANLEY SR. PD 04/06/2009