

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90678 029 ***150.00

DOCUMENT # P97000021433

1. Entity Name

VIVIAN E., INC.



Principal Place of Business

Mailing Address

6201 THOMAS DR
1501
PANAMA CITY FL 32408
US

P O BOX 9010
PANAMA CITY FL 32417
US

94050822



MOORE CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

126 N. Arnold Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Panama City Beach FL 32413

Zip
32413

Country
USA

Zip

Country

4. FEI Number
59-3433956

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

HARDY, KATHRYN J
6201 THOMAS DRIVE
PANAMA CITY FL 324085

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

Kathryn J. Hardy

Kathryn J. Hardy

04-09-04

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, 2004 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME HARDY, KATHRYN J
STREET ADDRESS 6201 THOMAS DRIVE
CITY-ST-ZIP PANAMA CITY FL 32408

TITLE D ☒ Change ☐ Addition
NAME Hardy, Kathryn J
STREET ADDRESS 126 N. Arnold Rd.
CITY-ST-ZIP Panama City Beach, FL 32413

TITLE D ☐ Delete
NAME HARDY, RONALD E
STREET ADDRESS 6201 THOMAS DRIVE
CITY-ST-ZIP PANAMA CITY FL 32408

TITLE D ☒ Change ☐ Addition
NAME Hardy, Ronald E
STREET ADDRESS 126 N. Arnold Rd.
CITY-ST-ZIP Panama City Beach, FL 32413

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

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:

Kathryn J. Hardy

Kathryn J. Hardy

04-09-04

850-233-1305

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #