

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000067127

Entity Name: OHIO V-LAND, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

3904 SE OLD ST LUCIE BLVD
STUART, FL 34996

New Principal Place of Business:

22 CASTLE HILL WAY
SEWALL'S POINT, FL 34996

Current Mailing Address:

3904 SE OLD ST LUCIE BLVD
STUART, FL 34996

New Mailing Address:

22 CASTLE HILL WAY
SEWALL'S POINT, FL 34996

FEI Number: 65-0772704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VINY, JUDY
3904 SE OLD DT. LUCIE BLVD.
STUART, FL 34996 US

Name and Address of New Registered Agent:

VINY, JUDY
22 CASTLE HILL WAY
SEWALL'S POINT, FL 34996 US

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.

SIGNATURE:

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VINY, JUDY
Address: 3904 SE OLD ST. LUCIE BLVD.
City-St-Zip: STUART, FL 34996

Title: SD () Delete
Name: GLASSER, GENE
Address: C/O ABRAMS ANTON P.A. 2021 TYLER ST
City-St-Zip: HOLLYWOOD, FL 33020

Title: TD () Delete
Name: HIRSH, CHARLES
Address: 7990 SW 117TH AVE. STE 203, C/O HIRSH & CO
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VINY, JUDY
Address: 22 CASTLE HILL WAY
City-St-Zip: SEWALL'S POINT, FL 34996

Title: SD (X) Change () Addition
Name: GLASSER, GENE
Address: C/O GREENSPOON 100 W. CYPRESS CR RD #700
City-St-Zip: FT LAUDERDALE, FL 33309

Title: TD (X) Change () Addition
Name: HIRSH, CHARLES
Address: 7990 SW 117TH AVE. STE 203
City-St-Zip: MIAMI, FL 33183

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: JUDY VINY

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date