2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2006 08:00 AN Secretary of State

DOCUMENT # P9700081057 1. Enlity Name VILLAGE PACK N SHIP, INC.				Secretary of State		
Principal Place 1080 BICHA LADY LAKE,	ARA BLVD	Mailing Address 1080 BICHARA BLVD LADY LAKE, FL 32159 US				
			and the value of the state of t	01122006 No Chg-P	CR2E034 (11/05)	
<u> </u>	OO NOT WRITE I	N THIS SPA	CE	4. FEI Number	Applied For	
. ,		Sau ou nous of of or homeonic transfer of the second of th		59-3471860 5. Certificate of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			-		1 Vo Wagan Go	
DOWNING, QUINTON 1080 BICHARA BLVD LADY LAKE, FL 32159				DO NOT W	TATAL 2	
8. The above the obligat SIGNATURE.	e named entity submits this statement for the plions of registered agent. Signature, typed or printed name of registered agent and title		1. ed office or registere d Agent signature required		orida. I am familiar with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			ncing \$5.	00 мау ва ФФ7-29/06—80053—0	00511499^M 02 150.00^M	
10. DILE	OFFICERS AND DIRECT	CTORS	· · · · · · · · · · · · · · · · · · ·	A AMERICAN AND AND AND AND AND AND AND AND AND A		
NAME STREET ADDRESS CITY-ST-ZIP	DOWNING, QUINTON 1080 BICHARA ROAD LADY LAKE, FL 32159		rangera a series de la companya de l		AND THE STATE OF T	
NITLE NAME STREET ADDRESS CITY-ST-ZIP				Constitution of the Consti		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			- <u>- ::</u> , <u>-</u>	DO NOT W	'RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SE	ACE	
TITLE NAME STREET ADDRESS CIFY-ST-ZIP				The state of the s	eran en	
TITLE NAME STREET ADDRESS CITY-SI-ZIP					The state of the s	
of the corp	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee ampowered or on an attachment with an address, with all	and accurate and that my signati If to execute this report as requir	lire chall have the c	ame legal elfect se if made under /	noths that I am an afficer as discates.	

4 10 06 Date

352-750-2777

SHARME AND TOED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR