


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 04, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000089532
 1. Entity Name
 V.L.M. REALTY, INC.



Principal Place of Business Mailing Address
 1310 53RD ST. 1310 53RD ST.
 WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407

DO NOT WRITE IN THIS SPACE



03172008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0811631	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LYNN MURRAY-SHEA
 1310 53RD ST
 W.P.B., FL 33407

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	MURRAY, VINCENT
STREET ADDRESS	1310 53RD ST.
CITY-ST-ZIP	WEST PALM BEACH, FL 33407
TITLE	P
NAME	LYNN MURRAY-SHEA
STREET ADDRESS	1310 53RD ST
CITY-ST-ZIP	WEST PALM BEACH, FL 33407
TITLE	S
NAME	MURRAY, MICHAEL
STREET ADDRESS	1310 53RD STREET
CITY-ST-ZIP	WEST PALM BEACH, FL 33407
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

04/15/08-80081-007 150.00

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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: Lynn Murray-Shea 4/1/08 561-845-1366
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #