

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90211 002 ***150.00

DOCUMENT # P97000096734

1. Entity Name
VANDELEY, INC.

Principal Place of Business

**1347 DILL AVE.
 SPRING HILL FL 34608**

Mailing Address

**1347 DILL AVE.
 SPRING HILL FL 34608**

2. Principal Place of Business

**8428 ELGROVE ST
 Suite, Apt. #, etc.**

3. Mailing Address

**8428 ELGROVE ST
 Suite, Apt. #, etc.**

City & State

SPRING HILL FLORIDA

City & State

SPRING HILL FL

Zip

Country

34608-4035

Zip

Country

34608-4035

4. FEI Number

59-3485450

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, ALLAN

**1347 DILL AVE. 8428 ELGROVE ST
 SPRING HILL FL 34608**

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-02-2002

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **DP**
 STREET ADDRESS **WILLIAMS, ALLAN**
 CITY-ST-ZIP **1347 DILL AVE.
 SPRING HILL FL 34608**

TITLE ☐ Delete
 NAME **DVP**
 STREET ADDRESS **WILLIAMS, BARBARA**
 CITY-ST-ZIP **1347 DILL AVE
 SPRING HILL FL 34604**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **8428 ELGROVE ST**
 CITY-ST-ZIP **SPRING HILL, FL 34608**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **8428 ELGROVE ST**
 CITY-ST-ZIP **SPRING HILL, FL 34608**

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

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/07/2002

Date

352-683-8317

Daytime Phone #

CR2E034 (9/01)