

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000076033

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: TAFT-VINELAND PROPERTIES, INC.

## Current Principal Place of Business:

365 TAFT-VINELAND ROAD  
SUITE 105  
ORLANDO, FL 32824 US

## New Principal Place of Business:

## Current Mailing Address:

365 TAFT-VINELAND ROAD  
SUITE 105  
ORLANDO, FL 32824 US

## New Mailing Address:

FEI Number: 59-3535019

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STAMP, MARTIN F  
940 HIGHLAND AVE  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

CHALIFOUX, DEBBE R  
365 TAFT-VINELAND RD  
SUITE 105  
ORLANDO, FL 32824 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: DEBBE R. CHALIFOUX

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: RUSSELL, JOHN H  
Address: 365 TAFT-VINELAND ROAD  
City-St-Zip: ORLANDO, FL 32824

Title: DVP ( ) Delete  
Name: RUSSELL, JOHN B  
Address: 2645 CHEROKEE ROAD  
City-St-Zip: ST CLOUD, FL 34772

Title: DVP ( ) Delete  
Name: MADISON, PETER D  
Address: 4908 OAK ISLAND RD  
City-St-Zip: ORLANDO, FL 32809

Title: ST ( ) Delete  
Name: CHALIFOUX, DEBBE R  
Address: 6105 LAKE LIZZIE DR  
City-St-Zip: SAINT CLOUD, FL 34771

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DEBBE R. CHALIFOUX

ST

04/16/2009

Electronic Signature of Signing Officer or Director

Date