2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000103208

Entity Name: V.K.A. PROPERTIES, INC.

FILED Jun 26, 2002 8:00 AM Secretary of State

Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:			
	WOLVERINE NT LUCIE, FL						
Current Mailing Address:			New Mailing Address:				
	WOLVERINE NT LUCIE, FL						
FEI Number: 65-0811609 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desire		Certificate of Status Desired (ed ()		
Name and	l Address of C	Current Registered Agent:	Name and Address of New Registered Agent:				
5923 N W	ON, VICKEY K WOLVERINE NT LUCIE, FL						
	named entity : e of Florida.	submits this statement for the բ	ourpose of changing i	ts registered o	office or registered agent, or	both,	
SIGNATUI	RE:						
	Electror	nic Signature of Registered Age	ent		Date		
		o satisfy its Intangible Tax filing red g Trust Fund Contribution ().	uirement and elects to d	do so (X).			
	S AND DIREC	- , ,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:	ANDERSON, V 5923 N W WOI) Delete ICKEY K LVERINE ROAD UCIE, FL 34986	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	ANDERSON, J 5923 N.W. WO) Change (X) Addition AMES C DLVERINE ROAD UCIE, FL 34986		
Title: Name: Address: City-St-Zip:) Delete	Title: Name: Address: City-St-Zip:	KENT, ETTA B 2580 S.E. HAN) Change (X) Addition IDEN ROAD UCIE, FL 34952		
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: Citv-St-Zip:	KENT, RAY S 2580 S.E. HAN			

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VICKEY K. ANDERSON PS 06/26/2002