

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012775

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** VICTORIA C. SPELLMAN TRANSLATION AND INTERPRETATION SERVICES, INC.

**Current Principal Place of Business:**

1626 38TH AVE N.  
ST. PETERSBURG, FL 33713

**New Principal Place of Business:**

**Current Mailing Address:**

1626 38TH AVE N.  
ST. PETERSBURG, FL 33713

**New Mailing Address:**

**FEI Number:** 59-3588750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPELLMAN, MARGARITA M  
1626 38TH AVE N.  
ST. PETERSBURG, FL 33713 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SPELLMAN, VICTORIA C  
Address: 13132 COPPER BROOK WAY  
City-St-Zip: HERNDON, VA 20171

Title: T ( ) Delete  
Name: MONTANEZ, CARMEN  
Address: 933 TUSCANY AVE  
City-St-Zip: BRANDON, FL 33511

Title: MGDI ( ) Delete  
Name: SPELLMAN, MARGARITA M MAG DIR  
Address: 1626 38TH AVE. N  
City-St-Zip: ST. PETERSBURG, FL 33713

**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:

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:** VICTORIA C. SPELLMAN

PRES

04/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date