2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: Tames E. Harrison

VI N' I, INC.						Secretary of State			
Principal Plac	ce of Business		Mailing Address						
4339 ROOSEVELT BLVD SUITE 600 JACKSONVILLE FL 32210 US		4339 ROOSEVELT BLVD SUITE 600 JACKSONVILLE FL 32210 US							
2. Principal F	Place of Business		3. Mailing Address			118 14 h) BELL BELL EST	4 4441 IBIN 1891 BB		••••
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOO	RE CI	R2E034 (10	/05)		
City & State		City & State		4. FEI Number 59	4. FEI Number 59-3603402		Applied For Not Applicable		
Zip	Co	ountry	Zip	Country	5. Certificate of Stati	us Desired		75 Addi Reguired	tional
6. Name and Address of Curre		nt Registered Agent		7. Name and Addre	7. Name and Address of New Registered Agent			<u> </u>	
1144	D0100N 1444	70 F		Name				•	
HARRISON, JAMES E 1639 SEA OATS DR. ATLANTIC BEACH FL 32233			Street Addre	Street Address (P.O. Box Number is Not Acceptable)					
				Слу	, <u>, , , , , , , , , , , , , , , , , , </u>	· -	FL Z	îp Code	
			for the purpose of changing	its registered affice ar regi	stered agent, or both, in th	e State of Floric		ar with, e	and accep
the obliga	dions of registered	agent.							
SIGNATURE	Satisfactors (world or office)	od owne of remetered en	ent and title if applicable (NII	MF Regulated Ament singulate test	tunied when remotations		DATE		
	Signature, typed or pret	od name of registered eq	ent and file it epolicable (Ni	OTE Registered Agent signature req	usred when roustating)		DATE		
After	Signature, typed or print FILE NOW!!! FI May 1, 2005 Fe th Peyable to Fio	E IS \$150.00 WIII Be \$550.	OR acceptance	OTE Registered Agent eignature req	9. Ele	action Campaig ust Fund Contrib	n Financing		30 May Bo
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