


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000110092

1. Entity Name
ST. CLAIR OF VERO BEACH, INC.



Principal Place of Business Mailing Address

2205 N. SOUTHWINDS #307 **979 BEACHLAND BLVD.**
VERO BEACH, FL 32963 **VERO BEACH, FL 32963**



01222007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0968956	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FENNELL, TODD W
979 BEACHLAND BOULEVARD
VERO BEACH, FL 32963

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALOG, JAMES 2205 N. SOUTHWINDS #307 VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALOG, ALVINA B 2205 N. SOUTHWINDS #307 VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OVP FENNELL, TODD W 979 BEACHLAND BLVD. VERO BEACH, FL 32963
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 05/09/07-80006-021 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James Balog* 1/26/07 772 2348204

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #