## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P99000110804**

1. Entity Name

VEGÁ, BROWN AND STANLEY, P.A.



Principal Place of Business

2345 STANFORD CT.

STE 603

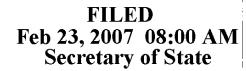
NAPLES, FL 34112

Mailing Address

2345 STANFORD CT.

STE 603

NAPLES, FL 34112





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CR2E034 (11/05)

4. FEI Number 59-3613789

Not Applicable \$8.75 Additional

Applied For

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

BROWN, THOMAS R 2345 STANFORD CT. #603 NAPLES, FL 34112

## DO NOT WRITE IN THIS SPACE

No Chg-P

			Service of the servic	
	e named entity submits this statement for the p tions of registered agent.	urpose of changing its registe	red office or registered agent, or bo	oth, in the State of Florida. I am Iamiliar with, and accept
SIGNATURE.				
	Signature, typed or printed name of registered agent and title	applicable (NQTE Register	ed Agent aignature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution		03/02/07-80075-001 150.00
10.	OFFICERS AND DIRECTORS		I was a same	the state of the s
TITLE	PD			e e e e e e e e e e e e e e e e e e e
NAME	VEGA, GEORGE JR		gradient de la version de la company de la c	_
STREET ADDRESS	2345 STANFORD CT. #603			
CITY-ST-ZIP	NAPLES, FL 34112			
TITLE	Т			The same of the sa
NAME	BROWN, THOMAS R			A Company of the Comp
STREET ADDRESS	2345 STANFORD CT. #603	. •	, s	
CITY-ST-ZIP	NAPLES, FL 34112	•		
TITLE				
NAME			40 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The second secon
STREET ADDRESS			I na	MOTMOTE

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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 accordate 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 in changed, or on an attachment with an address, with all other files empowered.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP