

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S44485

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** VANDERPOL ENTERPRISES, INC.

**Current Principal Place of Business:**

4898 STARLINE DR  
ST CLOUD, FL 34771 US

**New Principal Place of Business:**

**Current Mailing Address:**

4898 STARLINE DR  
ST CLOUD, FL 34771 US

**New Mailing Address:**

**FEI Number:** 59-3065972

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VANDERPOL, MARLENE  
4898 STARLINE DRIVE  
SAINT CLOUD, FL 34771 US

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

VANDER POL, MARLENE  
4898 STARLINE DRIVE  
SAINT CLOUD, FL 34771 US

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: MARLENE VANDER POL

04/05/2010

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

Title: STD  
Name: VANDER POL, MARLENE  
Address: 4898 STARLINE DRIVE  
City-St-Zip: SAINT CLOUD, FL 34771

Title: PD  
Name: VANDER POL, DOUGLES  
Address: 4898 STARLINE DRIVE  
City-St-Zip: SAINT CLOUD, FL 34771

Title: VPD  
Name: VANDER POL, MARK  
Address: 4898 STARLINE DRIVE  
City-St-Zip: SAINT CLOUD, FL 34771

I hereby 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 all other like empowered.

SIGNATURE: MARLENE VANDER POL

STD

04/05/2010

Electronic Signature of Signing Officer or Director

Date