## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# V58460

Entity Name: H V/F V C, INC.

Address:

City-St-Zip:

6186 SABAL PT CIR

PORT ORANGE, FL

FILED May 01, 2003 Secretary of State

Title: PVS () Delete Title: () Change () Addition Name: CRISTALLO, VITO E. J, R. Name:						
Current Mailing Address:  4164 SOUTH ATLANTIC AVENUE NEW SMYRNA BEACH, FL 32169  FEI Number: 59-3140712 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  CRISTALLO, V.C. 6186 SABAL POINT CIRCLE PORT ORANGE, FL 32124 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:  Electronic Signature of Registered Agent  Date  Electron Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR ( ) Change ( ) Addition Name:  Name:	Current P	rincipal Plac	e of Business:	New Principal Place o	of Business:	
Current Mailing Address:  4164 SOUTH ATLANTIC AVENUE NEW SMYRNA BEACH, FL 32169  FEI Number: 59-3140712 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  CRISTALLO, V.C. 6186 SABAL POINT CIRCLE PORT ORANGE, FL 32124 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:  Electronic Signature of Registered Agent  Date  Electron Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR ( ) Change ( ) Addition Name:  Name:	AACA COLITILIATI ANITIC AVENUE					
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City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VITO CRISTALLO PRES 05/01/2003