2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 18, 2007 8:00 am Secretary of State

ANNUAL REPORT. (AR)				Secretary		
DOCUMENT # V62991				04-18-2007 90169 (022 ***150.00	
VANDU	ISEN AND ASSOCIATES, INC	2.				
Principal Pla	aco of Business		The state of the s	1		
9450 WW	LAKE JEFFERY RD	Mailing Address		40067155		
LAKE CIT	Y FL 32055	9450 NW LAKE JEFFE LAKE CITY FL 32055	ERY RO	1006(122	CONTRACTOR OF THE PROPERTY OF	
US		US US				
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2. Principal	Place of Business - No P.O. Box #	3. Mailing Address			illigit (till plant and)	
9150 NW LAKE JEffery Rd P.O. Box 109			109.	\		
Suite, Ap	I. #, etc.	Suite, Apt. #, etc.		1st MOORE	CR2E034 (10/06)	
City & Sta	nie	ļ- <u>-</u>		121 MOOLIE	Applied For	
LAKE		City & State	mll	4. FEI Number 59-3147	Not Applicable	
Zip	Country	Lake City	Country Country		\$8.75 Additional	
3205		32056-0109	· Columbia	5. Certificate of Status Desire	ed Fee Required	
	6. Name and Address of Current	Registered Agent_	Coraryora	?. Name and Address of Ne	w Registered Agent	
\/A	N DUSEN JON DAVID		Name			
VAN DUSEN, JON DAVID 9150 NW LAKE KEFFERY RD			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
	KE CITY FL 32055					
			City		FL Zip Code	
# The above	page of online submits this state and for				r. (
the obligation	s named entity sobmits this statement for tions of registered agent.	rine purpose of changing its re	egistered office or regist	ered agent, or both, in the State of	of Florida. I am familiar with, and accept	
	0.0.0	121		lag	1 . 2 - 0	
SIGNATURE	Signal ye, typed or printed name of registered agent a	and title it applicable (MATE)	Registered Agent signature requir		10,207	
<u>_</u>		and the Labbleapie. (NOTE:	negisiered Agent signature requir	ed when reinstating)	UA1E	
)) After	ILE NOW!!! FEE IS \$150.00 May 1, 2007 Fee Will Be \$550.00	'		9. Election Ca	ampaign Financing \$5.00 May Be	
Make Checi	k Payable to Florida Department of	State		Trust Fund	Contribution. Added to Fees	
10.	OFFICERS AND I		11.	ADDITIONS (CHANCES TO	OFFICERS AND DIRECTORS IN 11	
me	D	Delete	TITLE	ADDITIONS/CHANGES TO	Change Addition	
NAME.	VANDUSEN, JON DAVID	C) Dode	NAME		[] Griange [] Addition	
STREET ADDRESS	9150 NW LAKE JEFFERY RD		STREET ADDRESS		{	
CITY-ST-ZIP	LAKE CITY FL 32055		CITY-ST-ZIP			
J1715.		☐ Delete	TITLE		Change Addition	
NAME)		NAME		l	
STREET ADDRESS			STREET ADDRESS		<u>,</u>	
CHY-ST-7IP	<u> </u>		CITY-ST /IP			
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CITY-ST-ZIP	İ		CITY-SJ-ZIP		}	
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NAME		CD Delete	NAME		Change D Addition	
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CITY-ST-ZIP			CITY-ST-ZIP			
TIME		☐ Delete	THILE		☐ Change ☐ Addition	
NAME CIRECT ADODESC			NAME)	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY_ST-ZIP			
			}			
TITLE NAME		Delete	TITLE NAME	•	☐ Change ☐ Addition	
STREET ADORESS			SIRFELADDRESS		1	
CITY-SI-ZIP			CTTY-ST-ZIP			
12. I hereby	certify that the information supplied with	this filing does not qualify for	the exemptions contain	ed in Section 119, Florida Statut	es. I further certify that the information	
indicated	on this report or supplemental report is poration or the receiver or trustee empore	true and accurate and that my	r signature shall have the	same legal effect as if made un	der oath; that I am an officer or director	
if change	d, or on an attachment with an address	, with all other like empowered	d.	, ,	The special in Block 10 th Block 11	
SIGNAT	TIPE. CO - Quy	1/21/20 1		m . 1 10 2	- Out	
SIGNAL	SIGNATURE AND TYPED OF PE	INTED NAME OF SIGNING OFFICER OF	RDIRECTOR	170/10/2	Dayrime Phone N	