

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000076924

**FILED  
Mar 24, 2015  
Secretary of State  
CC0653868979**

**Entity Name:** VF I, INC.

**Current Principal Place of Business:**

450 E LAS OLAS BLVD, STE 1500  
FT LAUDERDALE, FL 33301

**Current Mailing Address:**

450 E LAS OLAS BLVD, STE 1500  
FT LAUDERDALE, FL 33301

**FEI Number:** 20-5283587

**Certificate of Status Desired:** No

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

SERVICE U.S.A., INC.  
450 E. LAS OLAS BLVD, STE 1500  
FORT LAUDERDALE, FL 33301 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

**Officer/Director Detail :**

Title V  
Name HENNINGER JR, ROBERT J  
Address 450 E LAS OLAS BLVD, STE 1500  
City-State-Zip: FORT LAUDERDALE FL 33301

Title VT  
Name BRANDEN, CRIS V  
Address 450 E LAS OLAS BLVD, STE 1500  
City-State-Zip: FORT LAUDERDALE FL 33301

Title S  
Name HANDLEY, RICHARD L  
Address 450 E LAS OLAS BLVD, STE 1500  
City-State-Zip: FORT LAUDERDALE FL 33301

Title V  
Name MUXO, ALEX  
Address 450 E LAS OLAS BLVD, STE 1500  
City-State-Zip: FORT LAUDERDALE FL 33301

Title P  
Name HUIZENGA JR, H WAYNE  
Address 450 E LAS OLAS BLVD, STE 1500  
City-State-Zip: FT LAUDERDALE FL 33301

*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:** CRIS BRANDEN

VP

03/24/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date