2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State
04-18-2003 90439 011 ***150.00

DOCUMENT # F98000004641

1. Entity Name
VISIONAIR, INC.

Principal Place of Business	Mailing Address
5601 BARBADOS BLVD. CASTLE HAYNE NC 28429	P.O. BOX 9000 CASTLE HAYNE NC 28429

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 56-1747324 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HOLLOMAN, RICHARD J 5601 BARBADOS BLVD. CASTLE HAYNE NC 28429	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President/CEO Daniel Crawford 5601 Barbados Blvd Castle Hayne, NC 28429	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HOLLINGSWORTH, DENVER 5601 BARBADOS BLVD CASTLE HAYNE NC 28429	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPO NICHOLS, TIM 5601 BARBADOS BLVD CASTLE HAYNE NC 28429	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO/ Secretary Andrew Murray 5601 Barbados Blvd Castle Hayne, NC 28429	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CCFO HINDMAN, JOANNE 5601 BARBADOS BLVD. CASTLE HAYNE NC 28429	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CTO Michael Triggiano 5601 Barbados Blvd Castle Hayne, NC 28429	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PHILLIPS, CONSTANCE LEIGH 5601 BARBADOS BLVD. CASTLE HAYNE NC 28429	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COO John M. Lyons 5601 Barbados Blvd. Castle Hayne, NC 28429	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Daniel Crawford 3-11-03 (910)675-9117
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)