

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000111236

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** VISIONS IT CONSULTING SERVICES, LLC.

**Current Principal Place of Business:**

727 BELLSHIRE WAY  
WINTERGARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 784733  
ORLANDO, FL 34778

**New Mailing Address:**

P.O. BOX 784733  
WINTER GARDEN, FL 34778

**FEI Number:** 74-3240488

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPEAR, DARRELL  
727 BELLSHIRE WAY  
WINTERGARDEN, FL 34787 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SPEAR, DARRELL  
Address: P.O. BOX 784733  
City-St-Zip: WINTERGARDEN, FL 34778

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DARRELL SPEAR

MGR

04/26/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date