

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011346

FILED  
Apr 19, 2010  
Secretary of State

Entity Name: VISION NORTH PORT, INC.

**Current Principal Place of Business:**

14506 TAMIAMI TRAIL  
NORT PORT, FL 34287

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7274  
NORT PORT, FL 34290

**New Mailing Address:**

FEI Number: 26-1656371

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MONACO, MERCEDES V  
1339 N SUMTER BLVD  
NORT PORT, FL 34286 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MCCONVILLE, DEAN CHAIR  
Address: 14506 TAMIAMI TRAIL  
City-St-Zip: NORTH PORT, FL 34287

Title: D  
Name: LEBO, ANDY SEC  
Address: 779 TAMIAMI TRAIL UNIT 5  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D  
Name: MONACO, MERCEDES V TREAS  
Address: 1339 N SUMTER BLVD  
City-St-Zip: NORTH PORT, FL 34286

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MERCEDES MONACO

TREA

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date