

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000121844

Entity Name: VISION HOTELS, INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

2465 SR 16  
SAINT AUGUSTINE, FL 32092

## New Principal Place of Business:

## Current Mailing Address:

2465 SR 16  
SAINT AUGUSTINE, FL 32092

## New Mailing Address:

FEI Number: 03-0491976

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUBIK, JERRY  
4425 EAGLE CREEK CT  
ELKTON, FL 32033 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DUBIK, JERRY  
Address: 4425 EAGLE CREEK CT  
City-St-Zip: ELKTON, FL 32033

Title: VD ( ) Delete  
Name: SKALOWSKI, STELLA  
Address: 4721 INNISBROOK CT N  
City-St-Zip: ELKTON, FL 32033

Title: TD ( ) Delete  
Name: SKALOWSKI, ANDRZEJ  
Address: 4721 INNISBROOK CT . N  
City-St-Zip: ELKTON, FL 32033

Title: SD ( ) Delete  
Name: DUBIK, HELEN  
Address: 4425 EAGLE CREEK CT  
City-St-Zip: ELKTON, FL 32033

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JERRY DUBIK

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date