


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90009 048 ***138.75

DOCUMENT # M03000003913 1. Entity Name VISINITY, LLC					
Principal Place of Business 2400 YORKMONT RD CHARLOTTE, NC 28217			Mailing Address C/O TAX DEPT 2400 YORKMONT RD CHARLOTTE, NC 28217		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 44-1693741 20-164768	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BEST VENDORS MANAGEMENT CO., INC. 2400 YORKMOONT RD. CHARLOTTE, NC 28217		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Richard J. Rossitch</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			RICHARD J. ROSSITCH ASSISTANT SECRETARY Date 4/21/08 Daytime Phone #		

ATTACHMENT

60027627

VISINITY, LLC
Corporate Data Sheet

#M03000003913

Corporation Name: Visinity, LLC
Address: 2400 Yorkmont Road
Charlotte, NC 28217
FEIN Number: 20-1641768

Sole Member	Percentage Owned	Date Issued
Best Vendors Management Company, Inc.	100%	12/11/03

Authorized Signers

Anthony P. McDonald
C. Phillip Wells
Dale Whetstone
Gary Z. Zauf
Kristin E. Briotte
Deborah K. Delano
Richard J. Rossitch
Nicole Tharrinton

TITLE

President
Sr. VP, General Counsel & Secretary
Chief Financial Officer
Treasurer
Assistant Secretary
Assistant Secretary – Tax
Assistant Secretary
Assistant Secretary