SIGNATURE	: /WILLIAM D MEADOW/		C
	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	PRESIDENT	Title	SECRETARY
Name	MEADOW, WILLIAM D	Name	MEADOW, WILLIAM D
Address	4544 SWILCAN BRIDGE LANE N	Address	4544 SWILCAN BRIDGE LANE N
City-State-Zip:	JACKSONVILLE FL 32224	City-State-Zip:	JACKSONVILLE FL 32224
Title	TREASURER	Title	DIRECTOR
Name	RALPH, SHEA	Name	MEADOW, WILLIAM D
Address	4765 RIVERWOOD CIRCLE	Address	4544 SWILCAN BRIDGE LANE N
City-State-Zip:	SARASOTA FL 34231	City-State-Zip:	JACKSONVILLE FL 32224
Title	DIRECTOR		
Name	RALPH, SHEA		
Address	4765 RIVERWOOD CIRCLE		

4544 SWILCAN BRIDGE LANE N JACKSONVILLE, FL 32224 US

### FEI Number: 47-2529406

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

MEADOW, WILLIAM D 4544 SWILCAN BRIDGE LANE N JACKSONVILLE, FL 32224 US

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.

# Name Address City-Sta

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

PRESIDENT

SIGNATURE: WILLIAM D MEADOW

City-State-Zip: SARASOTA FL 34231

Electronic Signature of Signing Officer/Director Detail

03/19/2017 Date

Certificate of Status Desired: No

03/19/2017

Date

### 2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P14000020823

Entity Name: VISUAL REAL ESTATE, INC.

### **Current Principal Place of Business:**

4544 SWILCAN BRIDGE LANE N JACKSONVILLE, FL 32224

**Current Mailing Address:**