

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000175072

**Entity Name:** NEW VISIONS PRODUCTIONS LLC

**Current Principal Place of Business:**

416 CEDAR AVE  
NEW SMYRNA BEACH, FL 32169

**Current Mailing Address:**

416 CEDAR AVE  
NEW SMYRNA BEACH, FL 32169 US

**FEI Number:** 27-4762413

**Certificate of Status Desired:** No

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

MOSHER, JASPER A  
416 CEDAR AVE  
NEW SMYRNA BEACH, FL 32169 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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title PARTNER  
Name MOSHER, JASPER A  
Address 416 CEDAR AVE.  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title PARTNER  
Name MOSHER, TRAVIS W  
Address 418 CEDAR AVE  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title MGR  
Name SHADDOCK, CHRISTOPHER  
MATTHEW  
Address 416 CEDAR AVE  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title MGR  
Name COLMES, ELIZA LEIGH  
Address 416 CEDAR AVE  
City-State-Zip: NEW SMYRNA BEACH FL 32169

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JASPER MOSHER

**PARTNER**

**04/30/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date