Zip       Country       Zip       Country       6. Certificate of Status Desired       \$8.75 Additional Fee Required         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Name         CORPORATION COMPANY OF MIAMI 1500 EDWARD BALL BLID. 1000 CHOPIN PLAZA MIAMI FL 33131       Name       Street Address (P.O. Box Number is Not Acceptable)         8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the state of Florida.       FL       Zip Code         8. The above named entity submits this statement for the purpose of changing its registered Agent signature regated when rentating)       Date       Date         9/genue. Speed or printed name of registered agent are title # explicate.       (NOTE: Registered Agent signature regated when rentating)       Date         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10         The above named entity advecting agent are title # explicate.       THLE       Added to Faces       Make Check Payable to Department of State         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10       Date         The above named agent when the state of Florida.       TAYLOR, AL       The make       Change       Added to Face         Street Address       CARCHIP Street Address       TAYLOR, AL       Change	2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 739377 1. Entity Name VISION FOUNDATION, INC.					FILED Apr 11, 2001 8:00 am Secretary of State 04-11-2001 90010 020 ****61.25		
Suite, Apt. #, etc.       Suite, Apt. #, etc.       Do NOT WRITE IN THIS SPACE         City & State       Chy & State       4. FEI Number 59-1766029       Applied Fee Required         Zip       Country       2/0       Country       8. Certificate of Status Desired       \$9.75 Additional Fee Required         . Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       7. Name and Address of New Registered Agent         . Name       CORPORATION COMPANY OF MIAMI 1500 EDWARD BALL BLDG.       Street Address (P.O. Box Number is Not Acceptable)         100 CHOPIN PLAZA MIAMI FL 33131       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.       Street Address (P.O. Box Number is Not Acceptable)         SIGNATURE       Signauxa, Yordo a parket name of registered agent and their agricaba.       (NOTE: Registered Agent streatment)       Date         FEE IS \$61.25       9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees       Make Check Payable to Department of State         10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Trust Fund Contribution.       Date         11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change	P O BOX 24	130	P O BOX 2430	30		52578	2	
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Zip     Country     Zip     Country     s. Certificate of Status Desired     \$8:75 Additional       G. Name and Address of Current Registered Agent     7. Name and Address of New Registered Agent     7. Name and Address of New Registered Agent       CORPORATION COMPANY OF MIAMI     Street Address (P.O. Box Number is Not Acceptable)     Street Address (P.O. Box Number is Not Acceptable)       1500 EDWARD BALL BLDG.     Street Address (P.O. Box Number is Not Acceptable)     The above named entity submits this statement for the purpose of changing its registered agent, or both, in the state of Florida.       SIGNATURE	Suite, Apt	.t. #, etc.	Suite, Apt. #, etc.	·	-	DO NOT WRITE IN THI	S SPACE	
Zip       Country       Zip       Country       S. Certificate of Status Desired       S. S. Zadilonal Fee Required Fee Required Fee Required         6. Name and Address of New Registered Agent       7. Name and Address of New Registered Agent       Name Pee Required         CORPORATION COMPANY OF MIAMI 1500 EDWARD BALL BLDG. 100 CHOPIN PLAZA MIAMI FL 33131       Name Street Address (P.O. Box Number is Not Acceptable)         Street Address of New Registered Agent       Name Street Address (P.O. Box Number is Not Acceptable)         Street Address of New Registered Agent Address of New Registered Agent Address of New Registered Agent 1500 CHOPIN PLAZA MIAMI FL 33131       City         8. The above named entity submits this statement for the purpose of changing lits registered office or registered agent, or both, in the state of Fiorida.       Signature, topod or private name of regetered agent excelse         SIGNATURE	City & Sta	ate	City & State		4. FEI Number	E0-1766000	A	plied For
	Zip	Country	Zip	Country				ot Applicable
CORPORATION COMPANY OF MIAMI 1500 EDWARD BALL BLDG. 100 CHOPIN PLAZA       Street Address (P.O. Box Number is Not Acceptable)         MAMI FL 33131       City       FL         X. 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       Signature, typed or printed name of registered agent and title # explicable.       INOTE: Registered Agent signature registered agent, or both, in the state of Florida.         SIGNATURE       Signature, typed or printed name of registered agent and title # explicable.       INOTE: Registered Agent signature registered agent, or both, in the state of Florida.         SIGNATURE       Signature, typed or printed name of registered agent and title # explicable.       INOTE: Registered Agent signature registered agent, or both, in the state of Florida.         SIGNATURE       9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees       Make Check Payable to Department of State         0.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10       Change         nr.       Trust Fund Contribution.       Street Address       Citange       Ad         NRE       Z490 KEITH ST NW       Trust Fund Contess       Citange       Ad         Trust Fund Contess       City for Ficers AND DIRECTORS       11.       Address       Citange       Ad	<u> </u>	and the second of the second s					Fee Require	d'
CORPORATION COMPANY OF MIAMI 1500 EDWARD BALL BLDG. 100 CHOPIN PLAZA MIAMI FL 33131       Street Address (P.O. Box Number is Not Acceptable)         . 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		6. Name and Address of Current	Registered Agent	Name	7. Name and Ad	Idress of New Registered	d Agent	
MIAMI FL 33131     City     FL     Zip Code       A. 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, in the state of Florida.     Signature, in the state of Florida.       Signature, typed or printed name of registered agent and tits if applicable.     (NOTE: Registered Agent signature regulated when rendating)     DATE       FILE NOW: FEE IS \$61.25     9. Election Campaign Financing Trust Fund Contribution.     \$5,00 May Be Added to Fees     Make Check Payable to Department of State       0.     OFFICERS AND DIRECTORS     11.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10       TRE AMARE     TAYLOR, AL     ITTLE     NMME       2490 KEITH ST NW     Delete     ITTLE       VD     Delete     ITTLE       NAME     STREET ADDRESS     ITTLE       NAME     Delete     ITTLE       NAME     STREET ADDRESS     ITTLE       NAME     Delete     NAME       NAME     STREET ADDRESS     ITTLE       NAME     ITTLE     ITTLE       NAME     STREET ADDRESS     ITTLE       NAME     ITTLE     NAME       NAME     ITTLE     ITTLE       NAME     ITTLE     NAME       NAME     ITTLE     ITTLE       NAME     ITTL				· · · · · · · · · · · · · · · · · · ·		(P.O. Box Number is Not Acceptable)		
SIGNATURE         Signature, typed or printed name of registered agent and tibe if applicable.       (NOTE: Registered Agent signature required when rematating)       DATE         FILE NOW: FEE IS \$61.25       9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees       Make Check Payable to Department of State         0.       OFFICERS AND DIRECTORS       11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10         TRE       PD       Trust Fund Contribution.       ITILE         AME       TAYLOR, AL       Delete       TTILE         AME       TAYLOR, AL       Delete       TTILE         VD       Delete       TTILE       Change <th< td=""><td>-</td><td></td><td>i</td><td>City</td><td></td><td>F</td><td>L Zip Cod</td><td>e</td></th<>	-		i	City		F	L Zip Cod	e
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ITY-ST-ZIP       LAKE WACCAMAN NC 28450       CITY-ST-ZIP         TLE       SD       Delete       TITLE         AME       WOLF, RAYMOND C.       NAME         TREET ADDRESS       1469 TROY DR       STREET ADDRESS         TYY-ST-ZIP       MANSFIELD OH       CITY-ST-ZIP         TLE       T       Delete         TLE       T       Delete         TLE       T       Delete         TLE       DIXON, BERNARD H       NAME         STREET ADDRESS       3545 EDGEWOOD CIRCLE, NW       STREET ADDRESS	O. TLE AME TREET ADDRESS	Signature, typed or printed name of registered agent in FILE NOW: FEE IS \$61.25 OFFICERS AND DIF PD TAYLOR, AL 2490 KEITH ST NW	9. Election Campaigr Trust Fund Contrib RECTORS	Financing     \$2       bution.     Ad       11.       TITLE       NAME       STREET ADDRESS	5.00 May Be ded to Fees	Make Check Departmer	A Payable to nt of State	10
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