

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 25, 2005 8:00 am**  
**Secretary of State**

02-25-2005 90146 018 \*\*\*150.00

<b>DOCUMENT # F04000001564</b> 1. Entity Name <b>RED VISION SYSTEMS, INCORPORATED</b>					
Principal Place of Business <b>5341 SW 91ST TERRACE, SUITE E GAINESVILLE, FL 32608</b>			Mailing Address <b>5341 SW 91ST TERRACE, SUITE E GAINESVILLE, FL 32608</b>		
2. Principal Place of Business <b>100 SW 75th STREET</b> Suite, Apt. #, etc. <b>301</b>		3. Mailing Address <b>100 SW 75th STREET</b> Suite, Apt. #, etc. <b>301</b>			
City & State <b>GAINESVILLE, FL</b>		City & State <b>GAINESVILLE, FL</b>		4. FEI Number <b>59-3750631</b>	
Zip <b>32607</b>		Country <b>ALACHUA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>MULDOON, CRAIG 5341 SW 91ST TERRACE, SUITE E GAINESVILLE, FL 32608</b>			7. Name and Address of New Registered Agent Name <b>MULDOON, CRAIG</b> Street Address (P.O. Box Number is Not Acceptable) <b>100 SW 75th STREET, Suite 301</b> City <b>GAINESVILLE</b> <b>FL</b> Zip Code <b>32607</b>		
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 <u></u> DATE <u>2/21/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MULDOON, CRAIG <del>5341 SW 91ST TERRACE, SUITE E</del> <b>100 SW 75th ST</b> GAINESVILLE, FL 32608 <b>Suite 301</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ROSS, JOSEPH <del>5341 SW 91ST TERRACE, SUITE E</del> <b>100 SW 75th ST</b> GAINESVILLE, FL 32608 <b>Suite 301</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TWIBELL, BRIAN <del>5341 SW 91ST TERRACE, SUITE E</del> <b>100 SW 75th ST</b> GAINESVILLE, FL 32608 <b>Suite 301</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAZZOLA, MIKE <del>5341 SW 91ST TERRACE, SUITE E</del> GAINESVILLE, FL 32608		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	D LERNER, ANDREW <b>100 SW 75th ST, Suite 301</b> GAINESVILLE, FL 32607	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GALLAGHER, MIKE <b>100 SW 75th ST, Suite 301</b> GAINESVILLE, FL 32607	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u></u>			Date <u>2/21/05</u> Daytime Phone # <u>352-331-8242</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					