

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001564

FILED
Apr 10, 2007
Secretary of State

Entity Name: RED VISION SYSTEMS, INCORPORATED

Current Principal Place of Business:

100 SW 75TH STREET #301
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

100 SW 75TH STREET #301
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 59-3750631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULDOON, CRAIG
100 SW 75TH STREET SUITE 301
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MULDOON, CRAIG
Address: 100 SW 75TH ST SUITE 301
City-St-Zip: GAINESVILLE, FL 32607

Title: SD () Delete
Name: ROSS, JOSEPH
Address: 100 SW 75TH ST SUITE 301
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: TWIBELL, BRIAN
Address: 100 SW 75TH ST SUITE 301
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: LERNER, ANDREW
Address: 100 SW 75TH ST SUITE 301
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: GALLAGHER, MIKE
Address: 100 SW 75TH ST SUITE 301
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CEO (X) Change () Addition
Name: TWIBELL, BRIAN
Address: 100 SW 75TH ST SUITE 301
City-St-Zip: GAINESVILLE, FL 32607

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CRAIG MULDOON

PD

04/10/2007

Electronic Signature of Signing Officer or Director

Date