2006 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 08, 2006 8:00 am DOCUMENT # F05000004927 Secretary of State 1. Entity Name 08-08-2006 90002 038 ***150.00 TRUVISION, INC. Principal Place of Business Mailing Address 540 MARYVILLE CENTER DRIVE, SUITE 200 859 W. SOUTH JORDAN PKWY, 2ND FL. ST. LOUIS, FL 63141 SOUTH JORDAN, VT 84095 07312006 Chg-P CR2E034 (11/05) 4. FEI Number Applied For Not Applicable 87-0533399 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324-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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE 18 \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CEO Delete TITLE TITLE ☐ Change TD-Audition President ATWOOD LINDSAY NAME NAME Lindsay Atwood 16305 Swingley Ridge - Chesterfield, MO 63017 STREET ADDRESS 9486 S. WASATCH VIEW CR. STREET ADDRESS CITY-ST-ZIP SOUTH JORDAN, VT 84095 CITY-ST-ZIP CEO 4 Director TITLE TITLE FRAZIER, SCOTT NAME NAME James C. Wachtman 913 SUNBURST LANE 16305 Swingley Ridge-Chesterfield, NO 63017 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ALPINE, VT 84004 CITY-ST-7IP Trasurer & Director COO TITLE TITLE NAME NIELSON, JON NAME Steve Rasche Secretary & Director Chesterheld, MD 63017 STREET ADDRESS 11748 S. 4210 W. STREET ADDRESS CITY-ST-ZIP SOUTH JORDAN, VT 84095 CITY-ST-ZIP TITLE ☐ Detete TITLE NAME NAME Brian Aldrew Brian Aharen 16305 Swingley Ridge Rd Chesterfield, Ma 6307 Vice President Bill Leonard 16305 Swingley Ridge-Chesterfield W 6307 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 anyaddress, with all other like empowered.

CICNATIDE. MMSSSLL