

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 22, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000014962

1. Entity Name
VISIONS CLINICAL RESEARCH, LLC



Principal Place of Business
1630 S. CONGRESS AVE
SUITE 300
PALM SPRINGS, FL 33461

Mailing Address
1630 S. CONGRESS AVE
SUITE 300
PALM SPRINGS, FL 33461



07152004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1139849

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AQUA, KEITH
1630 S. CONGRESS AVE
SUITE 300
PALM SPRINGS, FL 33461

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
AQUA, KEITH A MD
1630 S CONGRESS AVE STE 300
PALM SPRINGS, FL 33461

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
HERBST, SETH J MD
1630 S CONGRESS AVE STE 300
PALM SPRINGS, FL 33461

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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07/22/04-80008-001 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

7/16/04 561 964-7880