

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023229

FILED
Feb 14, 2005
Secretary of State

Entity Name: VISIONS PROPERTY MANAGEMENT, L.L.C.

Current Principal Place of Business:

221 EAST GARDEN STREET
SUITE 8W
PENSACOLA, FL 32501 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12565
PENSACOLA, FL 32591 US

New Mailing Address:

FEI Number: 41-2053674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIRRAS, DAVID W
7820 BAY MEADOWS CIRCLE
PENSACOLA, FL 32507 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HIRRAS, DAVID W
Address: 7820 BAY MEADOWS CIRCLE
City-St-Zip: PENSACOLA, FL 32507 US

Title: MGR () Delete
Name: HIRRAS, KIMBERLY M
Address: 7820 BAY MEADOWS CIRCLE
City-St-Zip: PENSACOLA, FL 32507 US

ADDITIONS/CHANGES:

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 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DAVID HIRRAS

MGRM

02/14/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date