

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094355

Entity Name: VISIONS LLC

FILED
Mar 22, 2007
Secretary of State

Current Principal Place of Business:

1200 BENNETT ROAD
FORT PIERCE, FL 34947 US

New Principal Place of Business:

Current Mailing Address:

1200 BENNETT ROAD
FORT PIERCE, FL 34947 US

New Mailing Address:

FEI Number: 20-2106445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDEVERE, LUCILLE
1200 BENNETT ROAD
FT. PIERCE, FL 34947 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/MANAGERS:

Title: MGR () Delete
Name: VANDEVERE, LUCILLE
Address: 1200 BENNETT ROAD
City-St-Zip: FT. PIERCE, FL 34947

Title: MGR () Delete
Name: MONTEJO, RAUL EDWARD
Address: 1301 NORTH LAWNWOOD CIRCLE
City-St-Zip: FORT PIERCE, FL 34950

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: VANDEVERE, DAVID C
Address: 1200 BENNETT RD
City-St-Zip: FORT PIERCE, FL 34947

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 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: LUCILLE VANDEVERE

MGR

03/22/2007

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