## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010438

City-St-Zip:

Entity Name: VISIONS AND CONCEPTS, LC

FILED Jan 10, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 47 RENWORTH LANE 1800 PRIMROSE LANE PALM COAST, FL 32164 WELLINGTON, FL 33414 **Current Mailing Address: New Mailing Address:** 47 RENWORTH LANE 1800 PRIMROSE LANE PALM COAST, FL 32164 WELLINGTON, FL 33414 FEI Number: 20-2296782 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ST. HILAIRE, DION ST. HILAIRE, DION 47 RENWORTH LANE 1800 PRIMROSE LANE US WELLINGTON, FL 33414 US PALM COAST, FL 32164 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: 01/10/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: ( ) Change (X) Addition ST HILAIRE, CECILIA A MRS Name: Name: Address: Address: 1800 PRIMROSE LANE City-St-Zip: City-St-Zip: WELLINGTON, FL 33414 Title: () Delete Title: MGRM ( ) Change (X) Addition ST HILAIRE, DION C MR Name: Name: Address: Address: 1800 PRIMROSE LANE

City-St-Zip:

WELLINGTON, FL 33414

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: CECILIA ST HILAIRE DIR 01/10/2006