2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000028078

1. Entity Name



VISION DEVELOPMENT, LLC

Principal Place of Business

7115 THOMAS DRIVE

UNIT 1805

PANAMA CITY BEACH, FL 32408 US

Mailing Address

7115 THOMAS DRIVE

UNIT 1805

PANAMA CITY BEACH, FL 32408

US

FILED Mar 14, 2007 08:00 AM Secretary of State



01082007 No Chg-LLC

CR2E083 (11/05)

- 0	\$5.	00 Additional
20-2536528		Not Applicable
4. FEI Number		Applied For
		.,

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

WILLIAMS, JACK G 502 HARMON AVENUE PANAMA CITY, FL 32401

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	The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flor the obligations of registered agent.	ida. I am familiar with, and accept
SI	IGNATURE	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

9.	9. MANAGING MEMBERS/MANAGERS	
TITLE	MGR	
NAME	SOUTHERN SYSTEM ENTERPRISES, INC.	
STREET ADDRESS	1001 E BUSINESS HWY 98	
CITY-ST-ZIP	PANAMA CITY, FL 32401	
TITLE		
NAME		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filling does not qualify for the		

U00000666634 03/23/07-80076-022 50.00

DATE

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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, BRUTHORIZED REPRESENTATIVE

フェターハク

Date

Daytime Phone #