

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000056557

Entity Name: VISOROV, LLC

**FILED**  
**Jan 30, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

150 COCONUT DR STE 101  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

**Current Mailing Address:**

150 COCONUT DR STE 101  
INDIALANTIC, FL 32903

**New Mailing Address:**

FEI Number: 26-0319744

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THE TORPY GROUP, P.L.  
202 N. HARBOR CITY BLVD., STE. 200  
MELBOURNE, FL 32935 US

**Name and Address of New Registered Agent:**

SHERRILL BULLOCK PA  
1600 SARNO RD  
MELBOURNE, FL 32935 US

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: SHERRILL BULLOCK PA

01/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SORGENFREI, JOHN  
Address: 150 COCONUT DR #101  
City-St-Zip: INDIALANTIC, FL 32903

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify 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: JOHN SORGENFREI

PRES

01/30/2009

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