

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 02, 2008 8:00 am**  
**Secretary of State**

06-02-2008 90258 005 \*\*\*138.75

<b>DOCUMENT #</b> <span style="font-size: 1.2em;">L06000082607</span>			
<b>1. Entity Name</b> <span style="font-size: 1.2em;">Virtual Impressions LLC</span>			
<b>Principal Place of Business</b> <span style="font-size: 1.2em;">8351 38th St. Cir. E Unit 102 Sarasota, FL 34243</span>		<b>Mailing Address</b> <span style="font-size: 1.2em;">Same</span>	
<b>2. Principal Place of Business - No P.O. Box #</b> <span style="font-size: 1.2em;">8351 38th St. Cir Unit 102</span>		<b>3. Mailing Address</b> <span style="font-size: 1.2em;">Same</span>	
<b>Suite, Apt. #, etc.</b> <span style="font-size: 1.2em;">Same</span>		<b>Suite, Apt. #, etc.</b> <span style="font-size: 1.2em;">Same</span>	
<b>City &amp; State</b> <span style="font-size: 1.2em;">Sarasota</span>		<b>City &amp; State</b> <span style="font-size: 1.2em;">Same</span>	
<b>Zip</b> <span style="font-size: 1.2em;">34243</span>	<b>Country</b> <span style="font-size: 1.2em;">US</span>	<b>Zip</b> <span style="font-size: 1.2em;">Same</span>	<b>Country</b> <span style="font-size: 1.2em;">Same</span>
<b>6. Name and Address of Current Registered Agent</b> <span style="font-size: 1.2em;">Terri Lindsay 8351 38th St. Cir Unit 102 Sarasota, FL 34243</span>		<b>7. Name and Address of New Registered Agent</b> <b>Name</b> <b>Street Address (P.O. Box Number is Not Acceptable)</b> <b>City</b> <span style="float: right;"><b>FL</b> <b>Zip Code</b></span>	
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b> <b>SIGNATURE</b> <span style="font-size: 1.2em;">TDLP 5/5/08 Owner Terri Lindsay</span> <span style="float: right;"><b>DATE</b></span>			
<b>FILE NOW!!! FEE IS \$138.75</b> <b>Due by September 12, 2008</b>		<b>Make check payable to</b> <b>Florida Department of State</b>	
<b>9. MANAGING MEMBERS/MANAGERS</b>		<b>10. ADDITIONS/CHANGES</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input checked="" type="checkbox"/> <span style="font-size: 1.2em;">Owner</span> <input type="checkbox"/> Delete <span style="font-size: 1.2em;">Terri Lindsay</span> <span style="font-size: 1.2em;">8351 38th St. Cir. Unit 102</span> <span style="font-size: 1.2em;">Sarasota, FL 34243</span>	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>11. I hereby certify that the information supplied with this filing 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.</b>			
<b>SIGNATURE:</b> <span style="font-size: 1.2em;">TDLP 5/5/08 Owner Terri Lindsay</span>		<span style="float: right;"><b>941-730</b> <b>1459</b></span>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	