2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000054558

Entity Name: VISHANTI LLC

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1915 HILLI STE. 2	BROOKE TRA	dL			
	SSEE, FL 323	11			
Current Mailing Address:			New Mailing Address:		
1915 HILLBROOKE TRAIL					
STE. 2 TALLAHAS	SSEE, FL 323	11			
FEI Number: 26-0224318 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()			
Name and	Address of (Current Registered Agent:	Name and Address of New Registered Agent:		
1915 HILL 2	TIMOTHY A S BROOKE TRA SSEE, FL 323	dL			
The above in the State	named entity e of Florida	submits this statement for the p	ourpose of changing i	ts registere	d office or registered agent, or both
SIGNATU	RE:				
Electronic Signature of Registered Age			ent		Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	THIELEN, TIM	OKE TRAIL STE. 2	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	MGR (BABARIYA, SH 115 WILSON A RUTHERFORD	VE.	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	PANDE, NEER	Y DAWN DRIVE	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	me: dress:		Title: Name: Address: City-St-Zip:	MGR () Change (X) Addition PANDE, NAMIT 1011 BURNING TREE WAY TALLAHASSEE, FL 32317	

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: TIMOTHY A THIELEN MGR 03/19/2009