

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000100598

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: VISUAL INVESTMENTS OF SUWANNEE, LLC

**Current Principal Place of Business:**

90 SE 910 AVENUE  
SUWANNEE, FL 32692 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 280  
SUWANNEE, FL 32692 US

**New Mailing Address:**

FEI Number: 27-1179805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MILLER, WILLIAM R  
90 SE 910 AVENUE  
SUWANNEE, FL 32692 US

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

MILLER, WILLIAM R JR  
90 SE 910 AVENUE  
SUWANNEE, FL 32692 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: WILLIAM R. MILLER, JR.

04/10/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MILLER, WILLIAM R  
Address: 90 SE 910 AVENUE, PO BOX 280  
City-St-Zip: SUWANNEE, FL 32692 US

Title: MGR ( ) Delete  
Name: WILKINSON, SYLVIA  
Address: 8116 SW 122ND STREET  
City-St-Zip: ARCHER, FL 32608 US

Title: MGR ( ) Delete  
Name: MILLER, ELIZABETH D  
Address: 90 SE 910 AVENUE, PO BOX 280  
City-St-Zip: SUWANNEE, FL 32692 US

Title: MGR ( ) Delete  
Name: CATES, HAROLD T  
Address: 4085 CONWAY PLACE CIRCLE  
City-St-Zip: ORLANDO, FL 32812 US

Title: MGR ( ) Delete  
Name: CATES, SUE  
Address: 4085 CONWAY PLACE CIRCLE  
City-St-Zip: ORLANDO, FL 32812 US

Title: MGR ( ) Delete  
Name: APPLING, PATRICIA  
Address: 1227 MISTWATER TRACE  
City-St-Zip: LAWRENCEVILLE, GA 30043 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MILLER, WILLIAM R JR  
Address: 90 SE 910 AVENUE, PO BOX 280  
City-St-Zip: SUWANNEE, FL 32692 US

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

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

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

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

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: GLORIA MILLER

SEC

04/10/2008

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