

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000019236

Entity Name: VISION INVESTORS GROUP, LLC

**FILED**  
**Jul 08, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

508-A CAPITAL CIRCLE S.E.  
TALLAHASSEE, FL 32301

## **New Principal Place of Business:**

502-C CAPITAL CIRCLE S.E.  
TALLAHASSEE, FL 32301

## **Current Mailing Address:**

508-A CAPITAL CIRCLE S.E.  
TALLAHASSEE, FL 32301

## **New Mailing Address:**

502-C CAPITAL CIRCLE S.E.  
TALLAHASSEE, FL 32301

FEI Number: 27-2951864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMPSON, SUSAN S  
3520 THOMASVILLE ROAD, 4TH FLOOR  
TALLAHASSEE, FL 32309 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BARNETT, CHRISTY  
Address: 502-C CAPITAL CIRCLE S.E.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGM  
Name: TURNER, DOUGLAS E  
Address: 502-C CAPITAL CIRCLE SE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGM  
Name: TURNER, TERESA  
Address: 502-C CAPITAL CIRCLE SE  
City-St-Zip: TALLAHASSEE, FL 32301

I hereby 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: CHRISTY BARNETT

MGR

07/08/2010

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