

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000037221

Entity Name: VISION 48 LLC.

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3149 HARVEST LANE  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

3149 HARVEST LANE  
KISSIMMEE, FL 34744

**New Mailing Address:**

FEI Number: 27-0277844

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANCHEZ, TOMAS ESEDRO III  
3149 HARVEST LANE  
KISSIMMEE, FL 34744 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: MGRM  
Name: SANCHEZ, TOMAS ESEDRO III  
Address: 3149 HARVEST LANE  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM  
Name: SANCHEZ, REBECCA LYNN  
Address: 3149 HARVEST LANE  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM  
Name: ROBINS, JOHN L  
Address: P.O. BOX 568216  
City-St-Zip: ORLANDO, FL 32856

Title: MGRM  
Name: ROBINS, SUSAN E  
Address: P.O. BOX 568216  
City-St-Zip: ORLANDO, FL 32856

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: TOMAS SANCHEZ

MGRM

04/28/2010

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