

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000063930

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** VISION STONE CONCEPTS LLC

**Current Principal Place of Business:**

216 BLACKBURN RD  
NOKOMIS, FL 34275

**New Principal Place of Business:**

218 S. SEABOARD AVE  
VENICE, FL 34285

**Current Mailing Address:**

216 BLACKBURN RD  
NOKOMIS, FL 34275

**New Mailing Address:**

218 S. SEABOARD AVE  
VENICE, FL 34285

**FEI Number:** 27-0458808

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUTHRIE, SCOTT J  
216 BLACKBURN RD  
NOKOMIS, FL 34275 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: GUTHRIE, SCOTT J  
Address: 216 BLACKBURN RD  
City-St-Zip: NOKOMIS, FL 34275

Title: MGRM  
Name: VOISELLE, COREY  
Address: 5739 CABURN RD  
City-St-Zip: NORTH PORT, FL 34291

Title: MGRM  
Name: VOISELLE, JASON E  
Address: 5739 CABURN RD  
City-St-Zip: NORTH PORT, FL 34291

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:** SCOTT J GUTHRIE

MGR

03/30/2010

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