

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001881

FILED
Jan 08, 2008
Secretary of State

Entity Name: THE VISION INSURANCE GROUP, LLC

Current Principal Place of Business:

210 WESTWOOD PL.
SUITE 200
BRENTWOOD, TN 37027

New Principal Place of Business:

Current Mailing Address:

PO BOX 1324
BRENTWOOD, TN 370241324

New Mailing Address:

FEI Number: 62-1720361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: MGRC () Delete
Name: RUSSELL, JOHN C
Address: 210 WESTWOOD PL.
City-St-Zip: BRENTWOOD, TN 37027

Title: S () Delete
Name: TETZLAFF, DAVID L
Address: 210 WESTWOOD PLACE, STE 200
City-St-Zip: BRENTWOOD, TN 37027

ADDITIONS/CHANGES:

Title: MGRC (X) Change () Addition
Name: PACE, JOHN C
Address: 210 WESTWOOD PL.
City-St-Zip: BRENTWOOD, TN 37027

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: JOHN C. PACE

MGRC

01/08/2008

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