## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008566

Entity Name: ENVISION THE FUTURE, INC.

FILED Jan 24, 2009 Secretary of State

32 SUNDUNES CIRCLE 4670 LINKS DRIVE

PONCE INLET, FL 32127 D 703

PONCE INLET, FL 32127

Current Mailing Address: New Mailing Address:

2405 RIVER ROCK CIRCLE ARLINGTON, TX 76006

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DURTSCHI, BRAD K
32 SUNDUNES CIRCLE
DURTSCHI, BRAD K
4670 LINKS DRIVE

PONCE INLET, FL 32127 US D 703

PONCE INLET, FL 32127 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: 01/24/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 DURTSCHI, BRAD K
 Name:
 DURTSCHI, BRAD K

 Address:
 32 SUNDUNES CIRCLE
 Address:
 4670 LINKS DRIVE # D 703

 City-St-Zip:
 PONCE INLET, FL 32127
 City-St-Zip:
 PONCE INLET, FL 32127

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 POLLOCK, PAUL
 Name:

 Address:
 32 SUNDUNES CIRCLE
 Address:

 City-St-Zip:
 PONCE INLET, FL 32127
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 SCHNEIDER, LEE
 Name:

 Address:
 2905 TURN BULL BAY
 Address:

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32768
 City-St-Zip:

 Name:
 THORNTON, BRUCE
 Name:

 Address:
 6122 HALF MOON DRIVE
 Address:

 City-St-Zip:
 PORT ORANGE, FL 32127
 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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRAD K. DURTSCHI PRES 01/24/2009