

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008945

FILED  
May 16, 2008  
Secretary of State

Entity Name: VISION Y ACCION MISSION, INC.

**Current Principal Place of Business:**

188 FIRST LAKES CIR., #5  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

188 FIRST LAKES CIR., #5  
NAPLES, FL 34104

**New Mailing Address:**

FEI Number: 27-1771294      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BEDOYA, JOSE  
188 FIRST LAKES CIR., #5  
NAPLES, FL 34104    US

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

SPL INCOME TAX CORP  
6006 RADIO RD  
NAPLES, FL 34104    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: FERNANDO ODE

05/16/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVST      ( ) Delete  
Name: BODOYA, JOSE  
Address: 188 FIRST LAKES CIR., #5  
City-St-Zip: NAPLES, FL 34104

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T      ( ) Change (X) Addition  
Name: ARANGO, ANGELA V  
Address: 188 FURSE LAKES CIR. - APT 5  
City-St-Zip: NAPLES, FL 34104

Title: V      ( ) Change (X) Addition  
Name: SANDOVAL-RAMIREZ, MANUEL A  
Address: 15995 ARBOUR VIEW BLVD APT 532  
City-St-Zip: NAPLES, FL 34110

Title: V      ( ) Change (X) Addition  
Name: GUZMAN, EDUARDO  
Address: 7715 TARA CIR APT 108  
City-St-Zip: NAPLES, FL 34104

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: JOSE M BEDOYA

PVST

05/16/2008

Electronic Signature of Signing Officer or Director

Date