

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004772

FILED  
May 27, 2010  
Secretary of State

**Entity Name:** VIVID VISIONS, INC.

**Current Principal Place of Business:**

1227 HOUSTON AVE. N.  
LIVE OAK, FL 32064

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 882  
LIVE OAK, FL 32064 US

**New Mailing Address:**

**FEI Number:** 59-3349775      **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:**

LYONS, JENNIE F  
1227 HOUSTON AVE. N.  
LIVE OAK, FL 32064 US

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

WALKER, CONTINA  
1227 HOUSTON AVE. N.  
LIVE OAK, FL 32064 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: CONTINA WALKER

05/27/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: SELLGREN, KATHY  
Address: 5025 CR 795  
City-St-Zip: LIVE OAK, FL 32060

Title: P  
Name: BOISE, WENDY  
Address: 9633 125TH LN  
City-St-Zip: LIVE OAK, FL 32064

Title: VP  
Name: RIGGINS, BILL  
Address: 6262 155TH DR.  
City-St-Zip: LIVE OAK, FL 32060

Title: T  
Name: ESCO, CARROLL  
Address: 10289 117TH CT  
City-St-Zip: LIVE OAK, FL 32060

Title: D  
Name: NICHOLSON, LINDA  
Address: 1300 IRVIN AVE SW  
City-St-Zip: LIVE OAK, FL 32064

Title: D  
Name: EVANS, CAROLEA  
Address: 9142 160TH TERRACE  
City-St-Zip: LIVE OAK, FL 32060

I hereby 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 all other like empowered.

SIGNATURE: CONTINA WALKER

D

05/27/2010

Electronic Signature of Signing Officer or Director

Date