2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# N96000004927

Entity Name: VISION BROADCASTING OF FLORIDA, INC.

Current Principal Place of Business:

2701 HODGES BLVD
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

2701 HODGES BLVD
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 59-3421884 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH HULSEY & BUSEY
225 WATER STREET
SUITE 1800
JACKSONVILLE, FL 32202 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

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	PAUL D ZINK,	
Address:	205 NORTH WIND CT	
City-St-Zip:	PONTE VEDRA BCH, FL	
Title:	DVST	( ) Delete
Name:	JAMES C ZINK,	
Address:	1817 SPICEBERRY CIR EAST	
City-St-Zip:	JACKSONVILLE, FL	
Title:	D	( ) Delete
Name:	JOHNS, JIMMY R	
Address:	2701 HODGES BLVD	
City-St-Zip:	JACKSONVILLE, FL 32224	
Title:	D	(X) Delete
Name:	HART, JOHN B	
Address:	220 8TH AVE NORTH	
City-St-Zip:	JACKSONVILLE BEACH, FL 32250	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DHENNIE A. WALLACE MNGR 04/18/2007
Electronic Signature of Signing Officer or Director — Date