

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 12, 2003 8:00 am**  
**Secretary of State**

09-12-2003 90095 012 \*\*\*150.00

**DOCUMENT # P01000091883**

1. Entity Name  
**LADY OF VISION PREMIER REALTY INC.**



Principal Place of Business  
**6626 HAMPTON RD  
PENSACOLA FL 32505**

Mailing Address  
**6626 HAMPTON RD  
PENSACOLA FL 32505**

2. Principal Place of Business

**SAME AS ABOVE**

3. Mailing Address

**P O Box 17585**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
**PENSACOLA, FL**

Zip

Country

Zip  
**32522**

Country  
**USA**

4. FEI Number  
**59-3742412**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PERKINS, FRANCES M  
6626 HAMPTON RD  
PENSACOLA FL 32505**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D PERKINS, FRANCES M  
6626 HAMPTON RD  
PENSACOLA FL 32505** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**Sept 28 2003 8505057959**

CR2E034 (10/02)

Attachment

80147489

# P01000091883

## LADY OF VISION PREMIER REALTY INC.

P.O. BOX 17585  
PENSACOLA, FL 32522  
(850) 505-7959  
(850) 505-7918



September 09, 2003

To: Division of Corporations

To Whom It May Concern: I am submitting the appropriate fee for filing at this time, due to not receiving the request in the proper time. Please, please, please send any mail/correspondence from your office to my company's P.O. Box 17585 Pensacola, Fl. 32522. Do Not mail it to my street address. My neighbor received my mail, thought it was hers; and brought it to me; at this late a date. I would be very appreciative of your adherence to this matter to change my mailing address. I have requested the change before, and it still is being sent here. I have reported the problem to the Postmaster, and it is being solved per Postmaster.

Thank You Very Much,

Frances Marie Perkins

Where Your DREAM of Home Ownership Is Made Into A REALITY™