

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000018578

Entity Name: VISIENT, INC.

FILED
Apr 19, 2006
Secretary of State

Current Principal Place of Business:

3905 S SHADE AVE, STE A
SARASOTA, FL 34231

New Principal Place of Business:

401 INTERSTATE BLVD
SARASOTA, FL 34240

Current Mailing Address:

3905 S SHADE AVE, STE A
SARASOTA, FL 34231

New Mailing Address:

401 INTERSTATE BLVD
SARASOTA, FL 34241

FEI Number: 75-3007996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGGONER, HAROLD S
3905 SOUTH SHADE AVENUE, SUITE A
SARASOTA, FL 34231 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIMON, STEPHEN
Address: 3905 SOUTH SHADE AVENUE, SUITE A
City-St-Zip: SARASOTA, FL 34231

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LUNTZ, IRA
Address: 401 INTERSTATE BLVD.
City-St-Zip: SARASOTA, FL 34240

Title: T () Change (X) Addition
Name: SIMON, STEPHEN
Address: 3905 SOUTH SHADE AVENUE, SUITE A
City-St-Zip: SARASOTA, FL 34231

Title: S () Change (X) Addition
Name: WAGGONER, HAROLD S
Address: 401 INTERSTATE BLVD
City-St-Zip: SARASOTA, FL 34240

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAROLD S WAGGONER

S

04/19/2006

Electronic Signature of Signing Officer or Director

Date