2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2008
Secretary of State

DOCUMENT# P05000062277

Entity Name: VISIONARY INSURANCE GROUP, INC.

Current Principal Place of Business:

820 ALBEE RD.
SUITE 7
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

820 ALBEE RD.
SUITE 7
NOKOMIS, FL 34275

New Mailing Address:

FEI Number: 20-2746774 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GIBA, BRENDA
820 ALBEE RD
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

CHAMBERLAIN, LOGAN
820 ALBEE RD
NOKOMIS, FL 34275 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: LOGAN CHAMBERLAIN 05/08/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GIBA, BRENDA
Address: 5663 COUNTRY WALK LANE
City-St-Zip: SARASOTA, FL 34233

Title: CEO ( ) Delete
Name: CHAMBERLAIN, LOGAN
Address: 820 ALBEE RD.
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CHAMBERLAIN, LOGAN
Address: 820 ALBEE RD
City-St-Zip: NOKOMIS, FL 34275

Title: VP (X) Change ( ) Addition
Name: JOSEPH, BETH
Address: 820 ALBEE RD.
City-St-Zip: NOKOMIS, FL 34275

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

SIGNATURE: LOGAN CHAMBERLAIN P 05/08/2008
Electronic Signature of Signing Officer or Director Date