

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000030502

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** VISIONARY FINANCIAL SERVICES, INC.

**Current Principal Place of Business:**

4700 37TH STREET N  
SAINT PETERSBURG, FL 33714 US

**New Principal Place of Business:**

**Current Mailing Address:**

4700 37TH STREET N  
SAINT PETERSBURG, FL 33714 US

**New Mailing Address:**

**FEI Number:** 20-4435879

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCOPEL, LISA A  
4700 37TH STREET N  
SAINT PETERSBURG, FL 33714 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:** VP  
**Name:** DEPUGH, ROBERT V  
**Address:** 2164 15TH CIR N. ST.  
**City-St-Zip:** ST. PETERSBURG, FL 33713 US

**Title:** P  
**Name:** SCOPEL, LISSA A  
**Address:** 4700 37TH ST. N.,  
**City-St-Zip:** SAINT PETERSBURG, FL 33714

**Title:** ST  
**Name:** RAHDERT, GEORGE K  
**Address:** 535 CENTRAL AVE.  
**City-St-Zip:** SAINT PETERSBURG, FL 33701

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

**SIGNATURE:** LISA ANN SCOPEL

PRES

04/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date