

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 993000077696

1. Entity Name

Vision Trust Marketing, Inc

Principal Place of Business

Mailing Address

2. Principal Place of Business

201 McCullough Dr.

3. Mailing Address

201 McCullough Dr.

Suite, Apt. #, etc.

Suite 220

Suite, Apt. #, etc.

Suite 220

City & State

Charlotte NC

City & State

Charlotte NC

Zip

28262

Country

USA

Zip

28262

Country

USA

4. FEI Number

593236530

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Marshall S. Harris
5029 Edgewater Dr.
Orlando, FL 32810

7. Name and Address of New Registered Agent

Name Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street
City Tallahassee FL Zip Code 32301

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.

SIGNATURE Deborah D. Skipper

Deborah D. Skipper

8/22/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
AFTER MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE President / Director ☒ Delete
NAME J. William Brandner
STREET ADDRESS 5029 Edgewater Drive
CITY-ST-ZIP Orlando FL 32810

TITLE Vice President / Treasurer / Director ☒ Delete
NAME Todd D. Thrasher
STREET ADDRESS 5029 Edgewater Drive
CITY-ST-ZIP Orlando FL 32810

TITLE Vice President ☒ Delete
NAME Douglas Ward
STREET ADDRESS 700 Gladys Ct.
CITY-ST-ZIP Port Orange FL 32127

TITLE Secretary ☒ Delete
NAME Marshall S. Harris
STREET ADDRESS 5029 Edgewater Drive
CITY-ST-ZIP Orlando FL 32810

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Director ☐ Change ☒ Addition
NAME James C. Taylor
STREET ADDRESS 201 McCullough Drive, Suite 220
CITY-ST-ZIP Charlotte NC 28262

TITLE Director ☐ Change ☒ Addition
NAME Bill Lunsford
STREET ADDRESS 201 McCullough Drive Suite 220
CITY-ST-ZIP Charlotte NC 28262

TITLE Secretary ☐ Change ☒ Addition
NAME Larry Leebetter
STREET ADDRESS 201 McCullough Drive, Suite 220
CITY-ST-ZIP Charlotte NC 28262

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other fee empowered.

SIGNATURE: Bill Lunsford

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bill Lunsford

Date

8/21/01 (704) 548-1931

Daytime Phone #

FILED

01 AUG 22 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)