
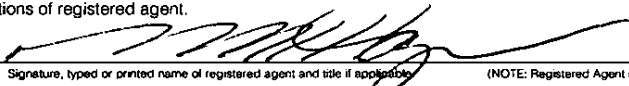



2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90024 025 ***150.00

DOCUMENT # P96000026309 1. Entity Name VISION ONE, INC.					
Principal Place of Business 729 BEVILLE RD. S. DAYTONA, FL 32119			Mailing Address 3820 S NOVA RD PORT ORANGE, FL 32127 US		
2. Principal Place of Business - No P.O. Box # 1900 Mason Avenue		3. Mailing Address 1900 Mason Avenue			
Suite, Apt. #, etc. Suite 100		Suite, Apt. #, etc. Suite 100			
City & State Daytona Beach, FL		City & State Daytona Beach, FL			
Zip 32117	Country USA	Zip 32117	Country USA	4. FEI Number 59-3374453	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAYNES, MICHAEL L 729 BEVILLE RD. S. DAYTONA, FL 32119			7. Name and Address of New Registered Agent Name Haynes, Michael L Street Address (P.O. Box Number is Not Acceptable) 1900 Mason Avenue Suite 100 City Daytona Beach, FL FL Zip Code 32117		
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:  DATE: 2/13/07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	DP HAYNES, MICHAEL L 729 BEVILLE RD. S. DAYTONA, FL 32119 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Haynes, Michael L 1900 Mason Avenue, Ste 100 Daytona Beach, FL 32117 <div style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLAHNIK, GREGORY 729 BEVILLE RD. S. DAYTONA, FL 32119 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Blahnik, Gregory 1900 Mason Avenue, Ste 100 Daytona Beach, FL 32117 <div style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BLAHNIK, SUZETTE 729 BEVILLE RD. S. DAYTONA, FL 32119 <div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Blahnik, Suzette 1900 Mason Avenue, Ste 100 Daytona Beach, FL 32117 <div style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 			Date: 2/13/07 Daytime Phone #: (321) 274-5525		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

40018576



01092007 Chg-P CR2E034 (12/06)