

## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000023443

1. Entity Name  
VISION FAMILY MANAGEMENT, INC.



**FILED**  
**Feb 11, 2004 08:00 AM**  
**Secretary of State**

Principal Place of Business  
7418 WESTMORELAND DRIVE  
SARASOTA, FL 34243

Mailing Address  
7418 WESTMORELAND DRIVE  
SARASOTA, FL 34243



01152004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0823001

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BOWMAN, DAVID G SR  
22 S TUTTLE AVE  
STE 3  
SARASOTA, FL 34237

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000048154  
02/11/04-80091-008 150.00

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME BECKSTEIN, EUGENE H  
STREET ADDRESS 7418 WESTMORELAND DRIVE  
CITY-ST-ZIP SARASOTA, FL 34243

TITLE D  
NAME BECKSTEIN, ANNABELLE  
STREET ADDRESS 7418 WESTMORELAND DRIVE  
CITY-ST-ZIP SARASOTA, FL 34243

TITLE D  
NAME BECKSTEIN, KIRK  
STREET ADDRESS 550 ROSE SHARON DR  
CITY-ST-ZIP LEXINGTON, SC 29072

TITLE D  
NAME OVENS, JULIE  
STREET ADDRESS 10305 BAULTUSROL PL  
CITY-ST-ZIP BRADENTON, FL 34202

TITLE D  
NAME TILTON, LESLIE  
STREET ADDRESS P.O. BOX 75 N/A  
CITY-ST-ZIP TERRA CEIA, FL 34250

TITLE D  
NAME BECKSTEIN, BRUCE  
STREET ADDRESS 7426 WESTMORE LAND DR  
CITY-ST-ZIP SARASOTA, FL 34243

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Eugene H. Beckstein*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EUGENE H. BECKSTEIN

Date

Daytime Phone #

Feb 11, 2004 941-317-2060