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2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 01, 2003 8:00 am
Secretary of State

0600544 AT

DOCUMENT # P98000040955 (L)

1. Entity Name
SM VISION MARKETING INC.

07-01-2003 90040 001 ***150.00

Principal Place of Business Mailing Address
255 NW TERRAPIN DR., SUITE 2 **255 NW TERRAPIN DR., SUITE 2**
DUNNELLON FL 34431 **DUNNELLON FL 34431**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
2037a E. Pennsylvania #C **2037a E Penn Ave**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
C

City & State City & State
Dunnellon FL **Dunnellon FL**
 Zip Country Zip Country
34430 USA **34430 USA**

4. FEI Number **59-3509372** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
COLSTON, DEBORAH L
255 NW TERRAPIN DR., SUITE 2
DUNNELLON FL 34431

7. Name and Address of New Registered Agent
 Name **KRISTIN MOONEY**
 Street Address (P.O. Box Number is Not Acceptable)
2037a E Pennsylvania Ave #C
Dunnellon FL 34430

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 *Kristin Mooney* **KRISTIN MOONEY** (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. **FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	PTD MOONEY, SCOTT A 255 NW TERRAPIN DR STE 2 DUNNELLON FL 34431	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD MOONEY, KRISTIN M 255 NW TERRAPIN DR., SUITE 2 DUNNELLON FL 34431	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 like empowered.

SIGNATURE: *Kristin Mooney* **KRISTIN MOONEY** **3/17/2003** **352-405-6844**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment #

90140544

098000040955



Vision Marketing Inc.

*A Full Service Cable Marketing Company
~ Direct Sales, Installations, Audits, Collections ~*

255 NW Terrapin Dr.
Suite 2
Dunnellon, FL 34431

Telephone: (800) 728-1034

Fax: (800) 728-1034

Email: visionmarketinginc@worldnet.att.net

June 27, 2003

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam,

Last week while surfing your web site (sunbiz.org), it was brought to my attention that my UBR was not posted to my account. I was immediately concerned since I had filed this report on line in mid-March. (I can not give you an exact date for my computer crashed in April and I lost many records.

I called your office to check on this error and to express my concern that I would be hit with late charges (even though I had assumed everything had gone through properly on line). At this time I was informed to send in a hard copy of the report, a check for \$150.00 and this letter of explanation – requesting a waiver in the late charges.

Should you have any questions, please feel free to contact me directly at 1-352-465-6844. Thank you in advance for your assistance.

Sincerely,

Kristin M. Mooney
Vice-President