2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
04-30-2001 90389 040 ***150.00

DOCUMENT # P98000102203

1. Entity Name
VISIONARY MARKETING, INC.

Principal Place of Business	Mailing Address
~~9301 NORTH A1A~~	~~9301 NORTH A1A~~
~~STE Z~~	~~STE Z~~
~~VERO BEACH FL 32963~~	~~VERO BEACH FL 32963~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
100 MESA PARK BOULEVARD	100 MESA PARK BOULEVARD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FELLSMERE, FLORIDA	City & State: FELLSMERE, FLORIDA
Zip: 32948 Country: USA	Zip: 32948 Country: USA

4. FEI Number 59-3547441 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

EVANS, RALPH L
3355 OCEAN DRIVE
VERO BEACH FL 32963

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
Zip Code

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 ______
Signature, typed or printed name of registered agent and title if 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	D	☐ Delete
NAME	PARSONS, JEFF S	
STREET ADDRESS	P.O. BOX 69	
CITY-ST-ZIP	WABASSO FL 32970	
TITLE	P	☐ Delete
NAME	AUGENSTEIN, E F	
STREET ADDRESS	179 CAPRONA ST	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/00)

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: [signature] 4/24/01 (561)-571-2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #