

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandia B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S90369 (7)

1. Corporation Name

VISUAL IMPACT, INC.



Principal Place of Business

5561 S ORANGE BLOSSOM TRL
ORLANDO FL 32809

Mailing Address

5561 S ORANGE BLOSSOM TRL
ORLANDO FL 32809

3. Date Incorporated or Qualified 10/28/1991	3a. Date of Last Report 04/19/1995
4. FEI Number 59-3089332	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

HARBIN, RAYMOND A.
7464 SUGAR BEND DRIVE
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

Signature of Registered Agent (If Registered Agent is not the same as the corporation's Secretary, the signature of the Secretary must also be provided.)

Signature of Registered Agent (If Registered Agent is not the same as the corporation's Secretary, the signature of the Secretary must also be provided.)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D HARBIN, RAYMOND A. 7464 SUGAR BEND DRIVE ORLANDO FL 32819	1.1 TITLE	☒ Change ☐ Addition
NAME	D HARBIN, DEBORAH A. 7464 SUGAR BEND DRIVE ORLANDO FL 32819	1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	7837 CLUBHOUSE EST. DRIVE
CITY-STATE		1.4 CITY-STATE	ORLANDO, FL 32819
TITLE		2.1 TITLE	☒ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	7837 CLUBHOUSE EST. DRIVE
CITY-STATE		2.4 CITY-STATE	ORLANDO, FL 32819
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE		3.4 CITY-STATE	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE		4.4 CITY-STATE	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE		5.4 CITY-STATE	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE		6.4 CITY-STATE	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement to annual 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 registered trustee or person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-96

407-857-7446

CR2E034 (12/95)