

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000016169

FILED
Jan 23, 2012
Secretary of State

Entity Name: VEC, L.L.C.

Current Principal Place of Business:

195 CONCORD DR.
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

195 CONCORD DR.
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 59-3694759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANADA, CAROLYN
195 CONCORD DR.
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: COX, KENNETH DVM
Address: 1984 ST ROAD 44
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGR
Name: RUBINSTEIN, RICHARD DVM
Address: 847 N. PARK AVE
City-St-Zip: APOPKA, FL 32712

Title: MGR
Name: PEARCE, DOUGLAS DVM
Address: 1909 MAGUIRE ROAD
City-St-Zip: WINDERMERE, FL 34786

Title: MGR
Name: DE HAAN, JACEK DVM
Address: 9905 SOUTH US HWY 17-92
City-St-Zip: MAITLAND, FL 32751

Title: MGR
Name: MCABEE, SCOTT DVM
Address: 4586 PALMETTO AVE
City-St-Zip: WINTER PARK, FL 32792

Title: MGR
Name: WILLIAMS, DOUGLAS P DVM
Address: 383 VISTA WILLA DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SCOTT MCABEE

MGR

01/23/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date