


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000025386

1. Entity Name
VS, LLC



Principal Place of Business
**3472 WEEMS ROAD, UNIT 1
 TALLAHASSEE, FL 32317**

Mailing Address
**3472 WEEMS ROAD, UNIT 1
 TALLAHASSEE, FL 32317**

DO NOT WRITE IN THIS SPACE



01312008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 55-0838349	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**CHAMPION, LAVAN E
 3472 WEEMS ROAD, UNIT 1
 TALLAHASSEE, FL 32317**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHAMPION, LAVAN E JR 1504 HICKORY TALLAHASSEE, FL 32303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHILDERS, SAMUEL S 2009 E FOREST DRIVE TALLAHASSEE, FL 32303
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 03/21/08-80042-020 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Ed. J. J. Date: 3/3/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #