


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 01, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L05000061508 1. Entity Name VERO SB, LLC	
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Principal Place of Business 505 SOUTH FLAGLER DRIVE STE 1325 WEST PALM BEACH, FL 33401	Mailing Address 505 SOUTH FLAGLER DRIVE STE 1325 WEST PALM BEACH, FL 33401
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**DO NOT WRITE IN THIS SPACE**



04272007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-4729933	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

JONES FOSTER SERVICE, LLC  
 505 SOUTH FLAGLER DRIVE STE 1100  
 WEST PALM BEACH, FL 33401

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_

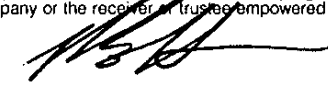
**Filing Fee is \$50.00 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANNA, PAUL B 505 SOUTH FLAGLER DRIVE STE 1325 WEST PALM BEACH, FL 33401
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05/21/07-80031-003 50.00

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:  Paul B Hanna 4/30/07 561-655-5337

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