

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000007216

**Entity Name:** VACO TAMPA, LLC

**Current Principal Place of Business:**

4030 BOY SCOUT BLVD  
STE 100  
TAMPA, FL 33607

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC4336030242**

**Current Mailing Address:**

5410 MARYLAND WAY  
STE 460  
BRENTWOOD, TN 37027

**FEI Number:** 20-2854742

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Authorized Person(s) Detail :**

Title	D	Title	D
Name	HOLLOMON, JAY M	Name	WALLER, BRIAN
Address	5410 MARYLAND WAY, SUITE 460	Address	5410 MARYLAND WAY, SUITE 460
City-State-Zip:	BRENTWOOD TN 37027	City-State-Zip:	BRENTWOOD TN 37027
Title	D	Title	D.
Name	HEWETT, BRADLEY	Name	BILLINGS, TIMOTHY W.
Address	500 NORTH WESTSHORE BLVD., STE 550	Address	200 GARRETT STREET SUITE M
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	CHARLOTTESVILLE VA 22902
Title	D.		
Name	BOSTELMAN, JERRY		
Address	5410 MARYLAND WAY STE 460		
City-State-Zip:	BRENTWOOD TN 37027		

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRIAN WALLER

**DIRECTOR**

**02/23/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date