

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000856

FILED
Feb 21, 2007
Secretary of State

Entity Name: VAN VLECK-ASHBY MANAGEMENT PROPERTIES, L.L.C.

Current Principal Place of Business:

13131 UNIVERSITY DRIVE
FT. MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

13131 UNIVERSITY DRIVE
FT. MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0979684

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANVLECK, PAM
13131 UNIVERSITY DRIVE
FT. MYERS, FL 33907 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: MGRM () Delete
Name: VAN VLECK, PAMELA K
Address: 3901 SE 19TH AVE.
City-St-Zip: CAPE CORAL, FL 33904

Title: MGRM () Delete
Name: VIP COMMERCIAL, INC.,
Address: 13131 UNIVERSITY DRIVE
City-St-Zip: FT. MYERS, FL 33907

Title: MGR () Delete
Name: DEZORT, CAROL S
Address: 13131 UNIVERSITY DRIVE
City-St-Zip: FORT MYERS, FL 33907

Title: MGR () Delete
Name: ASHBY, CHARLES C
Address: 13131 UNIVERSITY DRIVE
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VAN VLECK, PAMELA K
Address: 2104 WEST 1ST STREET, #2001
City-St-Zip: FT. MYERS, FL 33901

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: PAMELA K. VAN VLECK

MGMB

02/21/2007

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