2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Jan 15, 2008
Secretary of State

DOCUMENT# L00000015689

Entity Name: VLN DEVELOPMENT, LLC

Current Principal Place of Business:

9747 W. SAMPLE ROAD
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 759523
CORAL SPRINGS, FL 33075

New Mailing Address:

FEI Number: 65-1071397 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELSON, ROBERT W
2410 SW ISLAND CREEK TRAIL
PALM CITY, FL 34990 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: NELSON, ROBERT W TRUSTEE
Address: 2410 S.W. ISLAND CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990

Title: MGRM ( ) Delete
Name: NELSON, DARCI TRUSTEE
Address: 2410 S.W. ISLAND CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: NELSON, ROBERT W TRUSTEE
Address: 2410 S.W. ISLAND CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990 US

Title: MGRM (X) Change ( ) Addition
Name: NELSON, DARCI TRUSTEE
Address: 2410 S.W. ISLAND CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990 US

Title: MEMB ( ) Change (X) Addition
Name: NELSON, ANDREW S
Address: 9874 SW EASTBROOK CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34987 US

Title: MEMB ( ) Change (X) Addition
Name: NELSON, KELLI A
Address: 2410 SW ISLAND CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990 US

Title: MEMB ( ) Change (X) Addition
Name: NELSON, MARC W
Address: 2410 SW ISLAND CREEK TRAIL
City-St-Zip: PALM CITY, FL 34990 US

I hereby certify that the information supplied with this filing does not qualify 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: DARCI A. NELSON MGRM 01/15/2008

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