


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000016351

1. Entity Name
VBD, LLC



Principal Place of Business
**305 N. TAMAMI TRAIL
 RUSKIN, FL 33570**

Mailing Address
**P.O. BOX 129
 RUSKIN, FL 33570**

DO NOT WRITE IN THIS SPACE



01052004No Chg-LLC CR2E083 (10/03)

4. FEI Number
59-3697565

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**TIPTON, JOHN
 6210 GLEN ABBEY LN
 BRADENTON, FL 34202**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**Filing Fee is \$50.00
 Due by May 1, 2004**

U00000124867
 04/22/04-80061-025 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DICKMAN, GLENN K 1 DICKMAN ISLAND RUSKIN, FL 33570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DICKMAN, PAUL R 2 DICKMAN ISLAND RUSKIN, FL 33570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TIPTON, JOHN A 6210 GLEN ABBEY LN BRADENTON, FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DICKMAN, EDWARD L 102 12TH STREET S.W. RUSKIN, FL 33570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 60B, Florida Statutes.

SIGNATURE: *Edward L Dickman* Date: 4/19/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #