

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003771

FILED
Mar 04, 2004
Secretary of State

Entity Name: VSI, L.L.C.

Current Principal Place of Business:

7800 BELFORT PARKWAY, SUITE 165
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7800 BELFORT PARKWAY, SUITE 165
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 58-3705366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOLPE, TIMOTHY W
1301 RIVERPLACE BLVD., SUITE 1700
JACKSONVILLE, FL 32207 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/MEMBERS:

Title: MGRM () Delete
Name: BUTTNER, EDWARD W IV
Address: 7800 BELFORT PARKWAY, SUITE 165
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: POWELL, F. CARL III
Address: 3947 BOULEVARD CENTER DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: CROPPER, M. STEVEN
Address: 199 GOVERNERS ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM () Delete
Name: VOLPE, TIMOTHY W
Address: 1301 RIVERPLACE BLVD., SUITE 1700
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGRM () Delete
Name: HAMMOCK, MICHAEL T
Address: 7800 BELFORT PARKWAY, SUITE 165
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: MCCORMICK, CHARLES W
Address: 6800 SUEMAC PLACE
City-St-Zip: JACKSONVILLE, FL 32254

ADDITIONS/CHANGES:

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

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

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

Title: () Change () Addition
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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 Section 119.07(3)(i), 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: EDWARD W. BUTTNER IV

MGRM

03/04/2004

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