

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003787

Entity Name: VE ASSOCIATES, LLC

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

8441 COOPER CREEK BLVD
UNIVERSITY, FL 34201

New Principal Place of Business:

8441 COOPER CREEK BLVD
UNIVERSITY PARK, FL 34201

Current Mailing Address:

8441 COOPER CREEK BLVD
UNIVERSITY, FL 34201

New Mailing Address:

8441 COOPER CREEK BLVD
UNIVERSITY PARK, FL 34201

FEI Number: 01-0597666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAYTON, ALICIA H ESQ.
8441 COOPER CREEK BLVD.
UNIVERSITY PARK, FL US

Name and Address of New Registered Agent:

GAYTON, ALICIA H ESQ.
8441 COOPER CREEK BLVD.
UNIVERSITY PARK, FL 34201 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:

04/27/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: BALDAUF, DAVID H
Address: 8441 COOPER CREEK BLVD
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: MGRM () Delete
Name: VICTORIA ESTATES, LT, D.
Address: 8441 COOPER CREEK BLVD
City-St-Zip: UNIVERSITY PARK, FL 34201

ADDITIONS/CHANGES:

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: DAVID H. BALDAUF

MGR

04/27/2005

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