2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000028950 V-F INVESTORS II, LLC

Principa Place of Business

438 WEST KALEY STREET ORLANDO, FL 32806

Mailing Address

438 WEST KALEY STREET ORLANDO, FL 32806

FILED Jan 27, 2005 08:00 AM **Secretary of State**



01132005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 05-0538967

Applied Far Not Applicable

5. Certificate of Status Desired

 ∇

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VOORHEES, DONALD D 636 E. CLUB CIRCLE LONGWOOD, FL 32779

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The above named entity submits this statement for the purpose of cha the obligations of registered agent.	anging its registered office or registered agent, or both	n, in the State of Florida. I am familiar with, and accept
SIGNATURE		
Signature, typed or printed name of registered agent and title if applicable	(NOTE, Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2005		000000200885 01/28/05-80045-014 55.00
9. MANAGING MEMBERS/MANAGERS		

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VOORHEES, GREGORY D 746 RIVERBEND BLVD. LONGWOOD, FL 32779
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VOORHEES, DONALD D 636 E CLUB CIRCLE LONGWOOD, FL 32779
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 608, Florida Statutes.

SIGNATURE: 2

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR ANTHORIZED REPRESENTATIVE

01/13/05

<u>407-841-4270</u>

Daytime Phone *