2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000028950. ~ --

Entity Name
V-F INVESTORS II, LLC



FILED Feb 08, 2007 08:00 AM Secretary of State

Principal Place of Business

438 WEST KALEY STREET ORLANDO, FL 32806 Mailing Address

438 WEST KALEY STREET ORLANDO, FL 32806



01222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 05-0538967

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VOORHEES, DONALD D 493 VILLAGE PLACE LONGWOOD, FL 32779

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. . .			the Clair of Clair (and for Story	
	named entity submits this statement for the purpose of cha ions of registered agent.	nging its registered office of registered agent, or both,	in (ne stale of Pionga). I am familiar	wiiii, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstaling)	DATE	
Fi D	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VOORHEES, GREGORY D 529 SHINING ARMOR LANE LONGWOOD, FL 32779			
TITLE	MGRM		Hannanepotae	

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VOORHEES, DONALD D NAME STREET ADDRESS 493 VILLAGE PLACE CITY-ST-ZIP LONGWOOD, FL 32779 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

1-30-2007

Daytime Phone *