LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000033359

1. Entity Name

SIGNATURE:

VC PROPERTIES, LLC



FILED Mar 12, 2003 8:00 am Secretary of State 03-12-2003 90013 010 ****50.00

	DO NO	T WRITE	IN THIS S	PACE				
	Place of Business a omino . #, etc.	Drive	3. Mailing Address P.O. Box 20486 Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & Stat	worth	EI	City & State West Palm	Recelo	FL	4. FEI Number	Applied For Not Applicable	
Zip	Wiring	Country	Zip	Country	,	02-066 5881	5.00 Additional	
3346		USA	33416	USI		5. Certificate of status besiled	ee Required	
				Ne		7. Name and Address of Current Registered	Agent	
	n/	NATION IN	DITE	Nar	ne	•		
DO NOT WRITE IN THIS SPACE				Stre	Street Address (P.O.:Box Number is Not Acceptable) ————————————————————————————————————			
	IN	IFIS SP	AUE				1.0.10.	
<u>,</u>				City		FL	Zip Code	
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 Signature, typed or printed name of registered agent and title if applicable. DATE FEE IS \$50:00 Make Check Payable to Florida Department of State DUE BY MAY 1								
9.		MANAGING MEMBER	RS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Theodore 8188 Pa	is member R. Campbel lomino Drive Uh. Fl 33467	I	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Joseph V 8188 Pal	is nember itali omini Drive the PL 3340	7	TITLE NAME STREET ADDR CITY: ST-ZIP	ESS			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITLE : NAME STREET ADDR CITY-ST-ZIP	ESS	IN THIS SPAC	E	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	TITLE NAME STREET ADDR	ESS			
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.								