

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018729

Entity Name: 6032 PARTNERS VERO, L.L.C.

FILED
Mar 21, 2007
Secretary of State

Current Principal Place of Business:

5089 NORTH HIGHWAY A-1-A
VERO BEACH, FL 32963

New Principal Place of Business:

870 - 21ST STREET
VERO BEACH, FL 32960

Current Mailing Address:

5089 NORTH HIGHWAY A-1-A
VERO BEACH, FL 32963

New Mailing Address:

870 - 21ST STREET
VERO BEACH, FL 32960

FEI Number: 42-1598284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, J. ATWOOD III
5070 N. HIGHWAY A-1-A, SUITE 200
VERO BEACH, FL 32963 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/MANAGERS:

Title: MGRM () Delete
Name: THORPE, MICHAEL G
Address: 5089 NORTH HIGHWAY A-1-A
City-St-Zip: VERO BEACH, FL 32963

Title: MGRM () Delete
Name: THORPE, SALLIE L
Address: 5089 NORTH HIGHWAY A-1-A
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THORPE, MICHAEL G
Address: 870 - 21ST STREET
City-St-Zip: VERO BEACH, FL 32960

Title: MGRM (X) Change () Addition
Name: THORPE, SALLIE L
Address: 870 - 21ST STREET
City-St-Zip: VERO BEACH, FL 32960

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MICHAEL THORPE

MGRM

03/21/2007

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