2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019766

Entity Name: VSK ENTERPRISES, LLC

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3212 GULF GATE DR. SARASOTA, FL 34238

Current Mailing Address: New Mailing Address:

3212 GULF GATE DR. SARASOTA, FL 34238

FEI Number: 20-0027208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VAIL, J.A.

3212 GULF GATE DRIVE

SARASOTA, FL 34231 US

VAIL, J.A.

637 CRANE PRAIRIE WAY

OSPREY, FL 34229 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: JOAN A. VAIL, PSY.D.

JOAN A. VAIL, PSY.D. 03/23/2009

Electronic Signature of Registered Agent Date

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MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGRM (X) Change () Addition

 Name:
 VAIL, J.A.
 Name:
 VAIL, J.A.

 Address:
 637 CRANE PRAIRIE WAY
 Address:
 637 CRANE PRAIRIE WAY

 City-St-Zip:
 OSPREY, FL 34229
 City-St-Zip:
 OSPREY, FL 34229

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: SIMPKINS, D.L. Name: SIMPKINS, D.L.

Address: 637 E PEACE WAY Address: 637 CRANE PRAIRIE WAY
City-St-Zip: OSPREY, FL 34229 City-St-Zip: OSPREY, FL 34229

I hereby certify that the information supplied with this filing does not qualify 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: JOAN A. VAIL. PSY.D. MGRM 03/23/2009