

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032842

Entity Name: V.S. SETTLEMENT, LLC

FILED  
Mar 29, 2010  
Secretary of State

**Current Principal Place of Business:**

3500 GATEWAY DR, STE 201  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

3500 GATEWAY DRIVE  
SUITE # 201  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

3500 GATEWAY DR, STE 201  
POMPANO BEACH, FL 33069

**New Mailing Address:**

3500 GATEWAY DRIVE  
SUITE # 201  
POMPANO BEACH, FL 33069

FEI Number: 51-0480833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FINEBERG, LIBO B ESQ  
3500 GATEWAY DRIVE, SUITE 201  
POMPANO BEACH, FL 330694870 US

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

FINEBERG, LIBO B ESQ  
3500 GATEWAY DRIVE  
SUITE # 201  
POMPANO BEACH, FL 330694870 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: \_\_\_\_\_

03/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GOLDMAN, RICHARD M  
Address: 2585 GLADES CIRCLE  
City-St-Zip: WESTON, FL 33327

Title: MGRM  
Name: GOLDMAN, RENEE K  
Address: 2585 GLADES CIRCLE  
City-St-Zip: WESTON, FL 33327

Title: MGRM  
Name: GOLDMAN, BRENT O  
Address: 2585 GLADES CIRCLE  
City-St-Zip: WESTON, FL 33327

Title: MGRM  
Name: FINEBERG, LIBO B  
Address: 3500 GATEWAY DR., #201  
City-St-Zip: POMPANO BEACH, FL 33069

I hereby 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: BRENT GOLDMAN

MGRM

03/29/2010

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