2006 LIMITED LIABILITY COMPANY

**FILED** ANNUAL REPORT Aug 11, 2006 08:00 Al Secretary of State **DOCUMENT # L03000039330** 1. Entity Name VLC PROPERTIES, LLC Principal Place of Business Mailing Address **3912 SOUTH NINE DRIVE** 3912 SOUTH NINE DRIVE VALRICO, FL 33594 US VALRICO, FL 33594 US 08092006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 27-0069242 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARAPELLA, VICKIE L DO NOT WRITE 3912 SOUTH NINE DRIVE VALRICO, FL 33594 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) U00000574108 Filing Fee Is \$50.00 Due by September 6, 2006 08/11/06-80004-006 50.00 9. MANAGING MEMBERS/MANAGERS MGR TETLE CARAPELLA, VICKIE L 3912 SOUTH NINE DRIVE STREET ADDRESS CITY-ST-ZIP VALRICO, FL 33594 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7tP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing 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 by the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP