2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000050182

1. Entity Name
VVP, LLC

Principal Place of Business	Mailing Address
3582 HAMPTON GLEN PLACE JACKSONVILLE, FL 32257--691	3582 HAMPTON GLEN PLACE JACKSONVILLE, FL 32257--691

DO NOT WRITE IN THIS SPACE

04142005No Chg-LLC CR2E083 (10/03)

4. FEI Number
54-2140472
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PEARSON, JOHN E III
1416 FOREST AVENUE
NEPTUNE BEACH, FL 32266

DO NOT WRITE 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	PSHENICHNYY, VITALIY V
STREET ADDRESS	3582 HAMPTON GLEN PLACE
CITY-ST-ZIP	JACKSONVILLE, FL 32257
TITLE	
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310244
04/16/05-80070-006 50.00

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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.

SIGNATURE: Vitaliy Pshenichnyy 04/15/05 904 610-3724
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #