2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2007 8:00 am
Secretary of State
03-14-2007 90212 007 ****55.00

DOCUMENT # L03000056892

1. Entity Name
VICTORIA LOYD UNLIMITED, LLC

Principal Place of Business	Mailing Address
2602 SE GRAND DRIVE PORT ST LUCIE, FL 34952	2602 SE GRAND DRIVE PORT ST LUCIE, FL 34952

DO NOT WRITE IN THIS SPACE

02222007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
88-0517855
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LOYD, VICTORIA
2602 SE GRAND DRIVE
PORT ST LUCIE, FL 34952

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: Victoria D Loyd 4/3/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LOYD, VICTORIA D
STREET ADDRESS	2602 SE GRAND DRIVE
CITY-ST-ZIP	PORT ST LUCIE, FL 34952
TITLE	MGRM
NAME	LOYD, LEONARD F
STREET ADDRESS	2602 SE GRAND DRIVE
CITY-ST-ZIP	PORT ST. LUCIE, FL 34952
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Victoria D Loyd 4/3/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #