2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2005
Secretary of State

DOCUMENT# L04000000513

Entity Name: VIRGDC INTERPRISE LLC

Current Principal Place of Business:

499 CINNAMON DR.
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

499 CINNAMON DR.
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 84-1634149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COMBS, CLYDE JR.
499 CINNAMON DR.
SATELLITE BEACH, FL 32937 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: COMBS, CLYDE JR.
Address: 499 CINNAMON DR.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: MGRM ( ) Delete
Name: COMBS, GARY DONALD
Address: P.O. BOX 917411
City-St-Zip: LONGWOOD, FL 32791

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CLYDE COMBS JR PRES 02/08/2005

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