

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050584

Entity Name: VDK INVESTMENT LLC

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

10019 OUTLAW WAY  
LAND O' LAKES, FL 34639 US

## New Principal Place of Business:

24505 HIDEOUT TRAIL  
LAND O' LAKES, FL 34639 US

## Current Mailing Address:

250 CRYSTAL GROVE BLVD  
LUTZ, FL 33548 US

## New Mailing Address:

FEI Number: 74-3125918      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRIFFIN, LINDA  
250 CRYSTAL GROVE DRIVE  
LUTZ, FL 33548 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/MANAGERS:

Title: MGRM ( ) Delete  
Name: DALFINO, JOHN M  
Address: 10019 OUTLAW WAY  
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: MGRM ( ) Delete  
Name: DALFINO, VANDLA K  
Address: 10019 OUTLAW WAY  
City-St-Zip: LAND O' LAKES, FL 34639 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: DALFINO, JOHN M  
Address: 24505 HIDEOUT TRAIL  
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: MGRM (X) Change ( ) Addition  
Name: DALFINO, VANDLA K  
Address: 24505 HIDEOUT TRAIL  
City-St-Zip: LAND O' LAKES, FL 34639 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN DALFINO

MGRM

04/30/2009

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