

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067879

Entity Name: V-POWER, LLC

FILED  
Jan 08, 2007  
Secretary of State

**Current Principal Place of Business:**

600 OAK STREET  
BUILDING 2E  
PORT ORANGE, FL 32127 US

**New Principal Place of Business:**

**Current Mailing Address:**

600 OAK STREET  
BUILDING 2E  
PORT ORANGE, FL 32127 US

**New Mailing Address:**

FEI Number: 04-3797381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BENCH, TIMOTHY N ESQUIRE  
201 EAST PINE STREET  
SUITE 1500  
ORLANDO, FL 32801 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: COYLE, ERIK C  
Address: 301 MAURICE AVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: MGRM ( ) Delete  
Name: HINKLE, JASON L  
Address: 1201 SOUTH GLENCOE ROAD  
City-St-Zip: NEW SMYRNA, FL 32618 US

**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 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: ERIK COYLE

MGRM

01/08/2007

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