

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087597

Entity Name: VECTOR ESTATES LLC

FILED  
Apr 20, 2009  
Secretary of State

**Current Principal Place of Business:**

6300 NW 42ND COURT  
CORAL SPRINGS, FL 33067 US

**New Principal Place of Business:**

**Current Mailing Address:**

8202 WILES RD  
# 144  
CORAL SPRINGS, FL 33067 US

**New Mailing Address:**

FEI Number: 22-3904616

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLORIDA INCORPORATORS, INC.  
8875 HIDDEN RIVER PARKWAY STE. 300  
TAMPA, FL 33637 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: VASILCA, DAN  
Address: 6300 NW 42ND COURT  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: MGRM ( ) Delete  
Name: VASILCA, OLTEA  
Address: 6300 NW 42ND COURT  
City-St-Zip: CORAL SPRINGS, FL 33067

**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 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: DAN VASILCA

MGRM

04/20/2009

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