


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 10, 2007 8:00 am
Secretary of State

05-10-2007 90421 027 ****50.00

DOCUMENT # L05000019524					
1. Entity Name VIP EXECUTIVE REALTY, LLC					
Principal Place of Business 5957 BIRCHWOOD DRIVE TAMPA, FL 33625 US			Mailing Address 5957 BIRCHWOOD DRIVE TAMPA, FL 33625 US		
2. Principal Place of Business - No P.O. Box # 7239 Hollowell Dr.		3. Mailing Address 7239 Hollowell Dr.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State TAMPA FL		City & State TAMPA FL		4. FEI Number NOT APPLICABLE	
Zip 33634		Country U.S.A.		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				05072007 Chg-LLC CR2E083 (12/06)	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name THOMAS L. BIBLE Street Address (P.O. Box Number is Not Acceptable) 7239 Hollowell Dr. City TAMPA FL Zip Code 33634		
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 <u>Thomas L Bible</u> DATE <u>4/28/2007</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by September 14, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BIBLE, THOMAS L 5957 BIRCHWOOD DRIVE TAMPA, FL 33625	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BIBLE, THOMAS L 7239 Hollowell Dr. TAMPA, FL 33634
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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: <u>Thomas L Bible</u>			Date <u>4/28/2007</u> Daytime Phone # <u>813.205.9497</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					