2008 LIMITED LIABILITY CÓMPANY ANNUAL REPORT

DOCUMENT # L05000052985

1. Entity Name
VIKING CENTER, LLC



FILED Apr 17, 2008 08:00 A Secretary of State

Principal Place of Business

1048 GOODLETTE RD SUITE 201 NAPLES, FL 34102

SIGNATURE:

Mailing Address

PO BOX 10608 NAPLES, FL 34101



04102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
20-2930816		Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

DO NOT WRITE IN THIS SPACE

SIGNATURE AND THE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

6. Name and Address of Current Registered Agent

WOODWARD, MARK J 3200 TAMIAMI TRAIL NORTH, SUITE 200 NAPLES, FL 34103

DO NOT WRITE IN THIS SPACE

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_	Signature, typed or printed name of registered agent and title il applicable (f	NOTE. Registered Agent signature required when reinstating)	DATE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75					
9.	MANAGING MEMBERS/MANAGERS	04/30/08	8-80047-025 138.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OLSON, CLIFFORD A 1048 GOODLETTE RD SUITE 201 NAPLES, FL 34102				
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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.					