

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jul 12, 2007 08:00 AM
Secretary of State**

DOCUMENT # L05000053458

1. Entity Name
VECCHIO PROPERTIES, LLC



Principal Place of Business
888 EASTWARD CIRCLE
ZANESVILLE, OH 43701 US

Mailing Address
888 EASTWARD CIRCLE
ZANESVILLE, OH 43701 US



07082007 No Chg-LLC

CR2ED83 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
27-5464201

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HANNON, DONALD
11011 RIVERSIDE ROAD
LEESBURG, FL 34788

**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 if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE _____

**Filing Fee is \$50.00
Due by September 14, 2007**

1100000758360
07/12/07-80005-010 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MINNING, CARL A JR.
STREET ADDRESS	888 EASTWARD CIRCLE
CITY-ST-ZIP	ZANESVILLE, OH 43701
TITLE	MGR
NAME	MINNING, JOAN L
STREET ADDRESS	888 EASTWARD CIRCLE
CITY-ST-ZIP	ZANESVILLE, OH 43701
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: Carl A Minning Jr CARL A MINNING JR

SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

7/12/07

Daytime Phone #

740-454-1216

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