2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 22, 2006
Secretary of State

DOCUMENT# L05000070915

Entity Name: V2FS REALESTATE LLC

Current Principal Place of Business:

1887 LAKE MARKHAM PRESERVE TRAIL
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

1887 LAKE MARKHAM PRESERVE TRAIL
SANFORD, FL 32771

New Mailing Address:

FEI Number: 91-2186555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MELGEN, FLORA
1887 LAKE MARKHAM PRESERVE TRAIL
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

MELGEN, FLORA E MRS.
1887 LAKE MARKHAM PRESERVE TRAIL
SANFORD, FL 32771 US

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: FLORA E. MELGEN 08/22/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MELGEN, FLORA
Address: 1887 LAKE MARKHAM PRESERVE TRAIL
City-St-Zip: SANFORD, FL 32771

Title: MGR ( ) Delete
Name: MELGEN, VICTOR W DR
Address: 1887 LAKE MARKHAM PRESERVE TRAIL
City-St-Zip: SANFORD, FL 32771

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: FLORA E. MELGEN MGR 08/22/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date