2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000087388

1. Entity Name VGCG, LLC

Principal Place of Business

800 LAUREL OAK DRIVE, SUITE 300 NAPLES, FL 34108

Mailing Address

800 LAUREL OAK DRIVE, SUITE 300 NAPLES, FL 34108

FILED Feb 14, 2007 08:00 A Secretary of State



02012007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

X \$

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ATHAN, G. HELEN ESQ GRANT FRIDKIN PEARSON ATHAN & CROWN, P.A. 5551 RIDGEWOOD DRIVE, SUIE 501 NAPI ES EL 34108

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NAPLES, FL 34108		IN I	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 (NOTI	E Registered Agent signature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VGC, LLC 800 LAUREL OAK DRIVE, SUITE 300 NAPLES, FL 34108			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000636176 02/26/07-80006-005 55.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO I	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	HIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS				

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 emperced to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAMBOF SIGNING MAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/4/07

239566-2800

Daytime Phone #