

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093069

FILED
Apr 29, 2008
Secretary of State

Entity Name: VACA BUENA, LLC

Current Principal Place of Business:

360 CENTRAL AVENUE, 10TH FLOOR
ST.PETERSBURG, FL 33701

New Principal Place of Business:

21 SPORTSMAN ROAD
ROTONDA WEST, FL 33947

Current Mailing Address:

360 CENTRAL AVENUE, 10TH FLOOR
ST.PETERSBURG, FL 33701

New Mailing Address:

21 SPORTSMAN ROAD
ROTONDA WEST, FL 33947

FEI Number: 20-3527972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, JOHN T
360 CENTRAL AVENUE, 10TH FLOOR
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

KEEN, JOHN T
21 SPORTSMAN ROAD
ROTONDA WEST, FL 33947 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: JOHN T KEEN

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WHITE, JOHN T
Address: 360 CENTRAL AVENUE, 10TH FLOOR
City-St-Zip: ST.PETERSBURG, FL 33701 US

Title: MGRM () Delete
Name: KEEN, JOHN
Address: 21 SPORTSMAN RD.
City-St-Zip: ROTONDA WEST, FL 33947

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: KEEN, JOHN T
Address: 21 SPORTSMAN ROAD.
City-St-Zip: ROTONDA WEST, FL 33947

I hereby certify that the information supplied with this filing does not qualify 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: JOHN T KEEN

MGRM

04/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date