

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109412

FILED
Apr 30, 2007
Secretary of State

Entity Name: VIRGILIO PROPERTIES, LLC

Current Principal Place of Business:

149 PINEDA STREET
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

149 PINEDA STREET
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 20-4152900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, MIRTHA V CPA
420 SOUTH COUNTRY CLUB ROAD
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GODINHO, VIRGILIO S
Address: 149 PINEDA STREET
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: GODINHO, ANTHONY V
Address: 149 PINEDA STREET
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: GODINHO, TARA
Address: 149 PINEDA STREET
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: SANTOS, DOMINGOS
Address: 149 PINEDA STREET
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: SANTOS, LISA
Address: 149 PINEDA STREET
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES:

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

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

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

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 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: LISA SANTOS

MGRM

04/30/2007

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