

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000109873**

1. Entity Name  
**LAST VIKING HOLDING COMPANY, LLC**



Principal Place of Business  
**14081 82ND AVENUE NORTH  
SEMINOLE, FL 33776 US**

Mailing Address  
**14081 82ND AVENUE NORTH  
SEMINOLE, FL 33776 US**



01222007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**02-0759232**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**JOHNSON, WALTER S III  
14081 82ND AVENUE NORTH  
SEMINOLE, FL 33776**

**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 reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	JOHNSON, WALTER S III
STREET ADDRESS	14081 82ND AVENUE NORTH
CITY-ST-ZIP	SEMINOLE, FL 33776
TITLE	MGRM
NAME	JOHNSON, MARCUS B
STREET ADDRESS	5071 GLENWOOD COURT
CITY-ST-ZIP	PLEASANTON, CA 94588
TITLE	MGRM
NAME	WINSTON, HATHILY P
STREET ADDRESS	2676 GAPWALL COURT
CITY-ST-ZIP	PLEASANTON, CA 94566
TITLE	MGRM
NAME	JOHNSON, CHRISTOPHER P
STREET ADDRESS	10820 FOOTHILL ROAD
CITY-ST-ZIP	SUNOL, CA 94586
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000599806  
01/25/07-80041-021 55.00

**DO NOT WRITE  
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 a limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: