

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000001869

Entity Name: LIBERTY VP PANAMA CITY, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

310 WEST CENTRAL PARKWAY, SUITE 7000
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

310 WEST CENTRAL PARKWAY, SUITE 7000
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 20-5058143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIKKELSON, WM. MICHAEL
310 WEST CENTRAL PARKWAY, SUITE 7000
ALTAMONTE SPRINGS, FL 32714 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: LIBERTY AS HOLDINGS, LLC
Address: 2200 LUCIEN WAY ST 410
City-St-Zip: MAITLAND, FL 32751

Title: P () Delete
Name: MIKKELSON, MICHAEL WM
Address: 2200 LUCIEN WAY STE 410
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: MIKKELSON, ADAM
Address: 2200 LUCIEN WAY STE 410
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: JOHNSTON, WILLIAM
Address: 2200 LUCIEN WAY ST 410
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LIBERTY GS HOLDINGS, LLC
Address: 2200 LUCIEN WAY ST 410
City-St-Zip: MAITLAND, FL 32751

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: WM MICHAEL MIKKELSON

P

04/28/2009

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