

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100540

FILED
Apr 24, 2007
Secretary of State

Entity Name: 3VT L.L.C.

Current Principal Place of Business:

1467 LLOYDS COVE RD,
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

1467 LLOYDS COVE RD,
TALLAHASSEE, FL 32312 US

New Mailing Address:

PO BOX 13467
TALLAHASSEE, FL 32317 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMER, ROBERT H III
7853 PARLIAMENT CT.
TALLAHASSEE, FL, FL 32309 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: CLEMONS, DANE W
Address: 1467 LLOYDS COVE RD
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM () Delete
Name: FREDA, GREGORY L
Address: 5015 COLLINS LAKE DRIVE
City-St-Zip: MABLETON, GA 30126 US

Title: MGRM () Delete
Name: PALMER, ROBERT H III
Address: 7853 PARLIAMENT CT.
City-St-Zip: TALLAHASSEE, FL 32309 US

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT H PALMER III

MGRM

04/24/2007

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