

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000038308

Entity Name: VERIDIAN LLC

FILED  
Apr 06, 2008  
Secretary of State

**Current Principal Place of Business:**

119 WICKLIFFE DR.  
NAPLES, FL 34410

**New Principal Place of Business:**

13909 N DALE MABRY HWY  
# 107  
TAMPA, FL 33618

**Current Mailing Address:**

119 WICKLIFFE DR.  
NAPLES, FL 34410

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEVIN, DOROTHY  
2460 CEDAR TRACE CIR  
TAMPA, FL 33613 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: LEVIN, JONATHAN  
Address: 119 WICKLIFFE DR.  
City-St-Zip: NAPLES, FL 34110

Title: MGRM ( ) Delete  
Name: LEVIN, MARSHALL  
Address: 2460 CEDAR TRACE CIR  
City-St-Zip: TAMPA, FL 33613

**ADDITIONS/CHANGES:**

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: DOROTHY LEVIN

RA

04/06/2008

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