2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Nov 13, 2008
Secretary of State

DOCUMENT# L07000099056

Entity Name: LAS VEGAS CASINO LINES, L.L.C.

Current Principal Place of Business:

8680 N ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

8680 N ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: 36-4617604 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MULLIN, LARRY
752 BAYSIDE DRIVE, SUITE 306
CAPE CANAVERAL, FL 32920 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: PRES ( ) Delete
Name: MULLIN, LARRY E
Address: 752 BAYSIDE DRIVE, SUITE 306
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: SECT ( ) Delete
Name: MALONE, GILE
Address: 8680 N. ATLANTIC AVENUE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: TREA ( ) Delete
Name: STOTTLER, RICHARD H JR
Address: 8680 N. ATLANTIC AVENUE
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: MALONE, GILES
Address: 8680 N. ATLANTIC AVENUE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: SECT (X) Change ( ) Addition
Name: MALONE, GILES
Address: 8680 N. ATLANTIC AVENUE
City-St-Zip: CAPE CANAVERAL, FL 32920

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: GILES MALONE PRES 11/13/2008

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