

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084832

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: VOA-ELLERBE BECKET, LLC

## Current Principal Place of Business:

4776 NEW BROAD STREET  
200  
ORLANDO, FL 32814

## New Principal Place of Business:

## Current Mailing Address:

4776 NEW BROAD STREET  
200  
ORLANDO, FL 32814

## New Mailing Address:

FEI Number: 26-3257496

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DOUGLAS, JONATHAN F  
4374 NEW BROAD STREET  
200  
ORLANDO, FL 32814 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: MGR ( ) Delete  
Name: DOUGLAS, JONATHAN F  
Address: 4374 NEW BROAD STREET  
City-St-Zip: ORLANDO, FL 32814

Title: MGR ( ) Delete  
Name: ANGLIM, THOMAS G  
Address: 43464 CASTLE HARBOUR TERRACE  
City-St-Zip: LEESBURG, VA 20176

Title: MGR ( ) Delete  
Name: TOOLIS, MICHAEL A  
Address: 232 E WALTON PLACE  
City-St-Zip: CHICAGO, IL 60611

## 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 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: JONATHAN F DOUGLAS

MGR

01/16/2009

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