

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002329

Entity Name: VICTORY NETWORKS, LLC

FILED  
Apr 23, 2007  
Secretary of State

## Current Principal Place of Business:

995 STORY BOOK LANE  
OVIEDO, FL 32765

## New Principal Place of Business:

## Current Mailing Address:

995 STORY BOOK LANE  
OVIEDO, FL 32765

## New Mailing Address:

FEI Number: 74-2976600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE JAGER, MARCI  
306 JAMESTOWN DRIVE  
WINTER PARK, FL 32792 US

## Name and Address of New Registered Agent:

DE JAGER, MARCI R  
995 STORY BOOK LANE  
OVIEDO, FL 32765 US

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: MARCI R. DEJAGER

04/23/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: FOLLMER, TODD W  
Address: 5956 SHERRY LANE, STE 1575  
City-St-Zip: DALLAS, TX

Title: MGRM ( ) Delete  
Name: OHLAND, BILL M  
Address: 6011 MORNINGSIDE AVE.  
City-St-Zip: DALLAS, TX

Title: MGRM ( ) Delete  
Name: STERN, STEVE  
Address: 397 N. SPAULDING COVE  
City-St-Zip: HEATHROW, FL

Title: MGRM ( ) Delete  
Name: ARRINGTON, RICK  
Address: 2585 KING CIRCLE  
City-St-Zip: CONYERS, GA

Title: MGRM ( ) Delete  
Name: DEJAGER, MARCI  
Address: 995 STORY BOOK LANE  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM ( ) Delete  
Name: CHRISTOFF, CARL  
Address: 13842 SPRUCEWOOD DR.  
City-St-Zip: DALLAS, TX

## 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:

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: MARCI R. DEJAGER

MGRM

04/23/2007

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