

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2 Mar 06, 2006 8:00 am  
Secretary of State

02-08-2006 90088 012 \*\*\*\*50.00

<b>DOCUMENT # M03000004303</b> 1. Entity Name <b>VRB REALTY, L.L.C.</b>																																															
Principal Place of Business <b>176 NORTH SHORE POINT VERO BEACH, FL 32963</b>			Mailing Address <b>176 NORTH SHORE POINT VERO BEACH, FL 32963</b>																																												
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip      Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip      Country																																												
4. FEI Number <b>20 0243508</b> <b>APPLIED FOR</b>				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																																											
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$5.00</b> Additional Fee Required																																											
6. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code																																												
8. 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. I am familiar with, and accept the obligations of registered agent.																																															
SIGNATURE _____ (NOTE: Registered Agent signature required when requesting) <small>Signature, typed or printed name of registered agent and title if applicable.</small>																																															
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		Make check payable to <b>Florida Department of State</b>																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left;">9. MANAGING MEMBERS / MANAGERS</th> <th colspan="3" style="text-align: left;">10. ADDITIONS / CHANGES</th> </tr> </thead> <tbody> <tr> <td style="width: 15%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 55%;"> <b>MGR KEAN, JOHN 176 NORTH SHORE POINT VERO BEACH, FL 32963</b> </td> <td style="width: 10%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 55%;"></td> <td style="width: 10%; text-align: right;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td></tr> <tr><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Delete</td><td></td><td></td><td style="text-align: right;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td></tr> </tbody> </table>						9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR KEAN, JOHN 176 NORTH SHORE POINT VERO BEACH, FL 32963</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES																																												
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR KEAN, JOHN 176 NORTH SHORE POINT VERO BEACH, FL 32963</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																										
		<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition																																										
		<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition																																										
		<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition																																										
		<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition																																										
		<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition																																										
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.																																															
SIGNATURE: <u><i>John Kean - Manager</i></u> <b>JOHN KEAN</b>																																															
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				Date <u><b>2/5/06</b></u> Daytona Phone # _____																																											

Attachment



30001826

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 10, 2006

VRB REALTY, L.L.C.  
176 NORTH SHORE POINT  
VERO BEACH, FL 32963

Subject: VRB REALTY, L.L.C.

Reference Number:

M03000004303

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Because our records reflect the above referenced entity previously applied for its Federal Employer Identification (FEI) Number, it must now include its FEI number on the annual report/uniform business report or attach a photocopy of the FEI number application to the document before we can complete your filing.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE

ANNUAL REPORTS SECTION