2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# M08000005068

Entity Name: VCC, LLC

Current Principal Place of Business:

600 E. LAS COLINAS BLVD., STE. 1225
IRVING, TX 75039

New Principal Place of Business:

216 LOUISIANA ST
LITTLE ROCK, AR 72201 US

Current Mailing Address:

600 E. LAS COLINAS BLVD., STE. 1225
IRVING, TX 75039

New Mailing Address:

216 LOUISIANA ST
LITTLE ROCK, AR 72201 US

FEI Number: 26-3216681 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DAVIS, BRADLEY N
Address: 600 E. LAS COLINAS BLVD., STE. 1225
City-St-Zip: IRVING, TX 75039

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ALLEY, ESSA K
Address: 216 LOUISIANA ST
City-St-Zip: LITTLE ROCK, AR 72201 US

Title: MGRM ( ) Change (X) Addition
Name: ALLEY, SAM K
Address: 216 LOUISIANA ST
City-St-Zip: LITTLE ROCK, AR 72201 US

Title: MGRM ( ) Change (X) Addition
Name: BAILEY, ROBERT B
Address: 216 LOUISIANA ST
City-St-Zip: LITTLE ROCK, AR 72201 US

Title: MGRM ( ) Change (X) Addition
Name: JOHNSON, W. JEFFREY
Address: 216 LOUISIANA ST
City-St-Zip: LITTLE ROCK, AR 72201 US

Title: MGRM ( ) Change (X) Addition
Name: VRATSINAS, GUS M
Address: 216 LOUISIANA ST
City-St-Zip: LITTLE ROCK, AR 72201 US

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: JANE LOUIS POA 04/13/2009

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