## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000059541

City-St-Zip:

LONG GROVE, IL 60047

Entity Name: VP INVESTMENT PROPERTY II, INC

FILED Apr 29, 2008 Secretary of State

Entity Name: VP INVESTMENT PROPERTY II, INC.						
Current Pr	incipal Place	of Business:	New Princi	New Principal Place of Business:		
4634 PALM BEACH BLVD. 2ND FLOOR STE #3 FT. MYERS, FL 33905			UNIT B13	10090 INTERCOM DR UNIT B13 FT. MYERS, FL 33913		
Current Ma	ailing Addres	s:	New Mailin	New Mailing Address:		
4634 PALM BEACH BLVD. 2ND FLOOR STE # 3 FT. MYERS, FL 33905			UNIT B13	10090 INTERCOM DR UNIT B13 FT. MYERS, FL 33913		
FEI Number:	20-2974019	FEI Number Applied For ( )	FEI Number Not Applie	cable ( ) Certifica	ate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
STE#3 FT. MYERS	I BEACH BLVI S, FL 33905 L	JS	10090 INŤE UNIT B13 FT. MYERS	VENETIS, TOM C 10090 INTERCOM DRIVE UNIT B13 FT. MYERS, FL 33913 US of changing its registered office or registered agent, or both,		
in the State	of Florida.	submits this statement for the pe	ripose of changing is	a registered office of t	egistered agent, or both,	
SIGNATUR	E: TOM C. V	'ENETIS		04/29/2008		
	Electron	ic Signature of Registered Ager	nt		Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS	AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VENETIS, TOM	Delete ELL BREEZE DRIVE GS, FL 34135	Title: Name: Address: City-St-Zip:	()Change	( ) Addition	
Title: Name: Address: City-St-Zip:	D () PERIZES, STIL 6617 CARRIAG LONG GROVE,	E WAY	Title: Name: Address: City-St-Zip:	( ) Change	( ) Addition	
Title: Name: Address:	D () PERIZES, GEO 6621 CARRIAG		Title: Name: Address:	( ) Change	( ) Addition	

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: TOM C. VENETIS D 04/29/2008