

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007

FILED
Jul 12, 2007 08:00 AM
Secretary of State

DOCUMENT # A99000002006 1. Entity Name THE VENICE COMPANY, LTD., LLLP	
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Principal Place of Business 101 W. VENICE AVENUE, SUITE 25 VENICE, FL 34285	Mailing Address 101 W. VENICE AVENUE, SUITE 25 VENICE, FL 34285
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DO NOT WRITE IN THIS SPACE



07022007 No Chg-LP CR2E003 (12/06)

4. FEI Number 65-0098212	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HARTLEY, MICHAEL T 101 W. VENICE AVENUE, SUITE 25 VENICE, FL 34285

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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 _____
Signature, typed or printed name of registered agent and title if applicable

000000768440
07/12/07 80012-004 900.00

FILE NOW!!! FEE IS \$900.00
On or after September 14, 2007, Fee will be \$1000.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	P99000051091
NAME	VENCO MANAGEMENT, INC.
STREET ADDRESS	101 W. VENICE AV.E, SUITE 25
CITY - ST - ZIP	VENICE, FL 34285
DOCUMENT #	
NAME	TRAMMELL, N. JEAN
STREET ADDRESS	418 GULF DRIVE
CITY - ST - ZIP	VENICE, FL 34285
DOCUMENT #	
NAME	HIGMAN, CAROL A
STREET ADDRESS	622 SOUTH WEST 23RD PLACE
CITY - ST - ZIP	GAINESVILLE, FL 32601
DOCUMENT #	
NAME	TRAMMELL, THOMAS B
STREET ADDRESS	418 GULF DRIVE
CITY - ST - ZIP	VENICE, FL 32485
DOCUMENT #	
NAME	EHRHART, JEAN R TRUSTEE
STREET ADDRESS	1348 CAPRI ISLES BOULEVARD
CITY - ST - ZIP	VENICE, FL 34292
DOCUMENT #	
NAME	HARTLEY, MICHAEL T
STREET ADDRESS	147 TAMPA AVE E, UNIT 901
CITY - ST - ZIP	VENICE, FL 34285

DO NOT WRITE IN THIS SPACE

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Michael S Hartley 7/9/07 941 485-8220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE