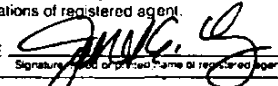
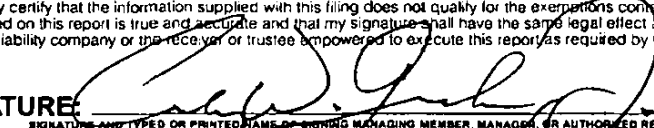


2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Mar 14, 2007 8:00 am
Secretary of State

02-12-2007 90311 031 ****50.00

DOCUMENT # L06000084098 1. Entity Name ETC VENTURES, LLC					
Principal Place of Business 203 EAST RICH AVE. DELAND, FL 32724			Mailing Address 203 EAST RICH AVE. DELAND, FL 32724		
2. Principal Place of Business - No P.O. Box # 101 N. Woodland Blvd.		3. Mailing Address 101 N. Woodland Blvd.			
Suite, Apt. #, etc. Ste. 301		Suite, Apt. #, etc. Ste. 301			
City & State DeLand, FL		City & State DeLand, FL			
Zip 32720		Country		Zip 32720	
Country		Country			
6. Name and Address of Current Registered Agent JANET E. MARTINEZ, P.A. 203 EAST RICH AVE. DELAND, FL 32724				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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  DATE 2/6/07 Signature of individual or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when removing)					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBER/MANAGERS 10. ADDITIONS/CHANGES					
TITLE NAME STREET ADDRESS CITY- ST- ZIP Managing Member Croley W. Graham, Jr. 101 N. Woodland Blvd., Ste. 301 DeLand, FL 32720 ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition			
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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 608, Florida Statutes.					
SIGNATURE 				Date 1/23/07 Daytime Phone #	