

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000048388

Entity Name: VENTEURS LLC

Current Principal Place of Business:

1001 AVENIDA DEL CIRCO
VENICE, FL 34285

Current Mailing Address:

P.O. BOX 423
ANACORTES, WA 98221

FEI Number: 27-0254372

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BOONE, STEPHEN KESQ
1001 AVENIDA DEL CIRCO
VENICE, FL 34285 US

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

Authorized Person(s) Detail :

Title MGRM
Name THE HERITAGE TRUST, DARRILYN BORBA TRUSTEE
Address 4120 ISLANDER WAY
City-State-Zip: ANACORTES WA 98221

Title MGRM
Name HARVEY, NEAL L
Address 3113 H AVENUE
City-State-Zip: ANACORTES WA 98221

Title MGRM
Name JUDO, SANTOSO
Address 41 BOULDER CREEK WAY
City-State-Zip: IRVINE CA 92602

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NEAL HARVEY

MEMBER MANAGER

01/14/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date