

**2018 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:** No

**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**

**01/18/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date