

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G15663

FILED  
Apr 12, 2005  
Secretary of State

Entity Name: VILLAGE VENTURES, INC.

## Current Principal Place of Business:

3070 BLANDING BLVD.  
MIDDLEBURG, FL 32068 US

## New Principal Place of Business:

3070 BLANDING BLVD. SUITE 114  
MIDDLEBURG, FL 32068 US

## Current Mailing Address:

3070 BLANDING  
MIDDLEBURG, FL 32068 US

## New Mailing Address:

3070 BLANDING SUITE 114  
MIDDLEBURG, FL 32068 US

FEI Number: 59-2240791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUKE, CAROLYN M.  
3070 BLANDING BLVD  
MIDDLEBURG, FL 32068 US

## Name and Address of New Registered Agent:

DUKE, CAROLYN M.  
3070 BLANDING BLVD SUITE 114  
MIDDLEBURG, FL 32068 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:

04/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: SD ( ) Delete  
Name: DUKE, CAROLYN M.  
Address: 6045 SR 21  
City-St-Zip: KEYSTONE HEIGHTS, FL

Title: PD ( ) Delete  
Name: DUKE, JOSEPH M,  
Address: 6045 SR 21  
City-St-Zip: KEYSTONE HEIGHTS, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: DUKE, CAROLYN M.  
Address: 6045 SR 21  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: PD (X) Change ( ) Addition  
Name: DUKE, JOSEPH M,  
Address: 6045 SR 21  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: CAROLYN M DUKE

SD

04/12/2005

Electronic Signature of Signing Officer or Director

Date