## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000179

Entity Name: VIPER VENTURES, LLC

FILED Apr 11, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

13400 SUTTON PARK DRIVE SOUTH 10475 CENTURION PARKWAY NORTH

**SUITE 1301** SUITE 201

JACKSONVILLE, FL 32224 JACKSONVILLE, FL 322456

**Current Mailing Address: New Mailing Address:** 

13400 SUTTON PARK DRIVE SOUTH 10475 CENTURION PARKWAY NORTH

**SUITE 1301** SUITE 201

JACKSONVILLE, FL 32224 JACKSONVILLE, FL 32256

FEI Number: 26-0007553 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CLARK, ROSS T 1558 SAN MARCO BLVD JACKSONVILLE, FL 32207 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

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change ( ) Addition

ROBERTS, CHRISTOPHER ROBERTS, CHRISTOPHER Name: Name:

13400 SUTTON PK DR S SUITE 1301 Address: 10475 CENTURION PARKWAY NORTH, SUITE 201 Address:

City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR Title: MGR (X) Change ( ) Addition ( ) Delete

VINCENTY, CLAUDIO E Name: Name: VINCENTY, CLAUDIO E

Address: 13400 SUTTON PK DR S SUITE 1301 Address: 10475 CENTURION PARKWAY NORTH, SUITE 201

City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR () Delete Title: MGR (X) Change ( ) Addition CAREY, JOHN E Name: CAREY, JOHN E Name:

13400 SUTTON PK DR S SUITE1301 Address: Address:

10475 CENTURION PARKWAY NORTH, SUITE 201

City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: CHRISTOPHER ROBERTS, MD 04/11/2007