2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2004 08:00 AM
--- Secretary of State

DOCUMENT # L020000 1. Entity Name SOUTH-VEN, LLC			
Principal Place of Business	Mailing Address		
780 SOUTH COLLIER BLVD., SUITE 314 MARCO ISLAND, FL 34145	1285 LONG RAPIDS ROAD ALPENA, MI 49707		

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	DO NOT WRITE IN THIS SPACE		01062004 No Chg-LLC	CR2E083 (10/03)	
D			4. FEI Number 26-0010942		Applied For Not Applicable
			5. Certificate of Status Desired		O Additional equired
·	6. Name and Address of Current Registered Agent		<u></u>		===
950 NORT SUITE 201	FREDERICK C H COLLIER BLVD. I SLAND, FL 34145		DO NOT WI		
WAROU IC	SEAND, I'E 34143				
	named entity submits this statement for the purpose of changing its registerions of registered agent.	red office or regist	tered ag <i>e</i> nt, or both, in the State of Flor	ida. I am familia	with, and accept
SIGNATURE_		- int.			1 - Time 3
	Signature, typed or printed name of registered agent and title if applicable. INOTE, Register	ed.Agent signature regul	red when reinstating)	DATE	
	iling Fee is \$50.00 ue by May 1, 2004		A STATE OF THE PERSON OF THE P		4-03
9.	MANAGING MEMBERS/MANAGERS	T	7 Th		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WINTER, DEBRA J 1285 LONG RAPIDS ROAD ALPENA, MI 49707				
TITLE NAME STREET AODRESS CITY-ST-ZIP			U00000 02/27/04-		50.00
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TITLE NAME STREET ADDRESS					
CITY-ST-ZIP	and that the information quantied with this filing does are quality for the co	omption stated in	Section 119.07(3Vi) Florida Statutos I		t the information
indicated limited lia	certify that the information supplied with this filing does not qualify for the ex d on this report is true and accurate and that my signature shall have the sar ability company or the receiver or trustee empowered to execute this report	ne legal effect as as required by Ch	Section 119.07(5)(4), Florida Statutes, I if made under oath, that I am a manag lapter 608, Florida Statutes.	ing member or n	nanager of the

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE