2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP

FILED Jan 27, 2005 08:00 AM **DOCUMENT # L02000000203 Secretary of State** 1. Entity Name SOUTH-VEN, LLC Principal Place of Business Mailing Address 780 SOUTH COLLIER BLVD., SUITE 314 1285 LONG RAPIDS ROAD MARCO ISLAND, FL 34145 ALPENA, MI 49707 01232005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 26-0010942 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Recuired 6. Name and Address of Current Registered Agent DO NOT WRITE KRAMER, FREDERICK C 950 NORTH COLLIER BLVD. SUITE 201 IN THIS SPACE MARCO ISLAND, FL 34145 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGR TITLE WINTER, DEBRA J 000000200827 01/28/05-80044-004 50.00 NAME STREET ADDRESS 1285 LONG RAPIDS ROAD ALPENA, MI 49707 CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: LA LA DEBRAJ. WINTER	121/05	989/356-4759
SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Daytime Phone #