2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 31, 2008 08:00 AN Secretary of State **DOCUMENT # L02000000203** 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 03252008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 26-0010942 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KRAMER, FREDERICK C DO NOT WRITE 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. Signature, board or contact name of registered agent and title if engineable (NOTE: Registered Agent signature required when reinstating) U00000876170 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 04/11/08-80061-024 138.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME WINTER, DEBRA J STREET ANNIBESS 1285 LONG RAPIDS ROAD CITY-ST-ZIP ALPENA, MI 49707 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: LALL DESPAS.WINTER 3 25 08 —
SIGNATURE AND TYPED OR PRINTED INDIRE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Department of the Confirmation of the Confirma

TITLE
NAME
STREET ADDRESS