## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT. -

SIGNATURE:

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

## Jan 12, 2006 08:00 AM **Secretary of State** DOCUMENT # L02000001983 1. Entity Name **4SR VENTURES, LLC** Principal Place of Business Mailing Address 222 S. PENNSYLVANIA AVE., STE. 200 222 S. PENNSYLVANIA AVE., STE. 200 WINTER PARK, FL 32789 WINTER PARK, FL 32789 01052006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0634427 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SALTSMAN, ROBERT P DO NOT WRITE 222 S. PENNSYLVANIA AVE., STE. 200 WINTER PARK, FL 32789 IN THIS SPACE 8. The above hamed 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, typed or printed name of registered agent and little if applicable Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR TITLE STRINGFELLOW, MARTIN B MAME 222 S. PENNSYLVANIA AVE., STE 200 01/17/06-80002-021 50:00 STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32789 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS 11. I hereby certify that the Information supplied with this filling 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.

**FILED**