2006 LIMITED LIABILITY COMPANY

Apr 17, 2006 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # L02000011924** 1. Entity Name 04-17-2006 90054 018 ****50.00 VEN, LLC Principal Place of Business Mailing Address 609 S RIDGEWOOD AVE ~~00T483 **609 SOUTH RIDGEWOOD AVENUE** DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 02262006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 04-3678987 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VENABLES, MARK DO NOT WRITE 609 S RIDGEWOOD AVE DAYTONA BEACH, FL 32114 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGR TITLE VENABLES, MARK L NAME 609 S RIDGEWOOD AVE STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32114 MGR TITLE NAME VENABLES, CLAIRE STREET ADDRESS 609 S RIDGEWOOD AV CITY-ST-ZIP DAYTONA BEACH, FL 32114 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TIME IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 trusted employees to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TILE NAME STREET ADDRESS CITY-ST-ZIP

> SKINATURE AND TYPED OR ANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #

FILED