


**2006-LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000001450 1. Entity Name VENUS FIDELITY TRUST, LLC	
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Principal Place of Business 2328 TENTH AVENUE NORTH STE. 403 LAKE WORTH, FL 33461-6606	Mailing Address 2328 TENTH AVENUE NORTH STE. 403 LAKE WORTH, FL 33461-6606
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04062006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 54-2096397	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RUKIN, ROGER
2328 TENTH AVENUE NORTH STE. 403
LAKE WORTH, FL 33461-6606

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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 _____ DATE _____
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, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JAMES B RUKIN REVOCABLE TRUST 2328 10TH AVE NO., STE 403 LAKE WORTH, FL 334616606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JULIA R. RUKIN REVOCABLE TRUST 2328 10TH AVE NO., STE 403 LAKE WORTH, FL 334616606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUKIN, ROGER B 2328 10TH AVE NO., STE 403 LAKE WORTH, FL 334616606
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04/25/06-80027-025 50.00

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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:  DATE _____ DAYTIME PHONE # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE