


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000009554 1. Entity Name NAVARRE VENTURES, L.L.C.	
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Principal Place of Business 25 W. CEDAR STREET, SUITE 304 PENSACOLA, FL 32501	Mailing Address 25 W. CEDAR STREET, SUITE 304 PENSACOLA, FL 32501
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DO NOT WRITE IN THIS SPACE



01132005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 26-1905899	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BOROWSKI, T.A. JR 25 W. CEDAR STREET, SUITE 304 PENSACOLA, FL 32501
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**DO NOT WRITE
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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BOROWSKI, T.A. JR 25 W. CEDAR STREET, SUITE 304 PENSACOLA, FL 32501
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01/25/05-80099-025 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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:  **T. A. Borowski, Jr., Mgr., 1/17/05** **850/4292027**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #