


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 04, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000014607 1. Entity Name VILLA VENTURES, LLC	
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Principal Place of Business 2037 E. CROOKED LAKE ESTATES LANE EUSTIS, FL 32726	Mailing Address 2037 E. CROOKED LAKE ESTATES LANE EUSTIS, FL 32726
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02102005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 04-3754113	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

8. Name and Address of Current Registered Agent CAMPIONE, DAVID M ESQ. 600 JENNINGS AVENUE EUSTIS, FL 32726	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

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

U000000362830
05/05/05-80134-010 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PANZO, GREGORY J 2037 E. CROOKED LAKE ESTATES LANE EUSTIS, FL 32726
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

Gregory J. Panzo, Managing Member

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #