

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015033

Entity Name: DNC VENTURES LLC

FILED
Apr 02, 2007
Secretary of State

Current Principal Place of Business:

25 SECOND SECOND STREET NORTH, STE. 440
ST. PETERSBURG, FL 33701

New Principal Place of Business:

11400 4TH STREET NORTH, STE. 1307
ST. PETERSBURG, FL 33716

Current Mailing Address:

25 SECOND SECOND STREET NORTH, STE. 440
ST. PETERSBURG, FL 33701

New Mailing Address:

11400 4TH STREET NORTH, STE. 1307
ST. PETERSBURG, FL 33716

FEI Number: 43-2036627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, EVAN
25 SECOND SECOND STREET NORTH, STE. 440
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

SMITH, EVAN
11400 4TH STREET NORTH, STE. 1307
ST. PETERSBURG, FL 33716 US

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.

SIGNATURE:

04/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SPLIT ROCK LIMITED P, ARTNERSHIP LLP
Address: 25 SECOND STREET NORTH, STE 440
City-St-Zip: ST PETERSBURG, FL 33701 33

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SPLIT ROCK LIMITED P, ARTNERSHIP LLP
Address: 11400 4TH STREET NORTH, STE 1307
City-St-Zip: ST PETERSBURG, FL 33716

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: R.E.SMITH

PTNR

04/02/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date