



# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90031 009 \*\*\*\*50.00

<b>DOCUMENT # L03000022393</b>					
<b>1. Entity Name</b> HONU VENTURES, LLC					
<b>Principal Place of Business</b> 702 S. WILLOW AVE. TAMPA, FL 33606 US			<b>Mailing Address</b> 702 S. WILLOW AVE. TAMPA, FL 33606 US		
<b>2. Principal Place of Business</b> 701 SOUTH HOWARD AVENUE Suite, Apt. #, etc. SUITE #106-303 City & State TAMPA, FL Zip 33606 Country USA		<b>3. Mailing Address</b> 701 SOUTH HOWARD AVENUE Suite, Apt. #, etc. SUITE #106-303 City & State TAMPA, FL Zip 33606 Country USA			
<b>6. Name and Address of Current Registered Agent</b> WASSMER, DAVID M 702 S. WILLOW AVE. TAMPA, FL 33606		<b>7. Name and Address of New Registered Agent</b> Name <u>RONALD C. WHITE, ESQ.</u> Street Address (P.O. Box Number is Not Acceptable) 5348 FIRST AVENUE City <u>ST. PETERSBURG</u> FL Zip Code <u>33710</u>			
<b>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.</b> SIGNATURE <u>Ronald C. White</u> DATE <u>April 17, 2006</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00</b> <b>Due by May 1, 2006</b>			<b>Make check payable to</b> <b>Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WASSMER, DAVID M 702 S. WILLOW AVE. TAMPA, FL 33606	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	10 MANSELL COURT, SUITE 200 ROSWELL, GA 33076-4823
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<b>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.</b>					
<b>SIGNATURE:</b> <u>Ronald C. White, Esquire</u> <u>April 17, 06 (727) 323-5700</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					