

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026461

Entity Name: CSA VENTURES, LLC

FILED
Apr 04, 2007
Secretary of State

Current Principal Place of Business:

5131 RECKER HIGHWAY
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

5131 RECKER HIGHWAY
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 45-0519941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARRUZA, CARLOS M
5131 RECKER HIGHWAY
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ARRUZA, CARLOS M
Address: 5131 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

Title: MGRM () Delete
Name: SSI LUBRICANTS LLC,
Address: 5131 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

Title: MGRM () Delete
Name: ARRUZA, SILVIA B
Address: 5131 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

Title: MGRM () Delete
Name: SILVIA B ARRUZA, TTE, E,CREDIT SHEL T E R TRUST
Address: 5131 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ARRUZA, CARLOS M MGR
Address: 5131 RECKER HIGHWAY
City-St-Zip: WINTER HAVEN, FL 33880

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CARLOS M ARRUZA

MGR

04/04/2007

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