2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Mar 10, 2005 8:00 am Secretary of State DOCUMENT # L03000035579 1. Entity Name 03-10-2005 90039 018 ****50.00 CGL INVESTMENTS, LLC Mailing Address Principal Place of Business 7402 PARK SPRINGS CIRCLE ORLANDO FL 32835 7402 PARK SPRINGS CIRCLE ORLANDO FL 32835 3. Mailing Address 2. Principal Place of Business 1947 Black Lake Blvd 1947 Black Lake Blvd Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/04) City & State City & State 4. FEI Number Applied For 41-2047521 Winter Garden FL Winter Garden _ Not-Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 34787 34787 Fee Required Orange Orange 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Bert Chesnut Street Address (P.O. Box Number is Not Acceptable) BRADLEY, RICHARD 524 SIMPSON ROAD KISSIMMEE FL 34744 1947 Black Lake Blvd Zip Code <u>Winter Garden</u> 34787 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 ature, typed or printed name of registered agent and title if applicable Bert Chesnut (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005 ADDITIONS/CHANGES MANAGING MEMBERS / MANAGERS 10. ☐ Change ☐ Addition THILE **MGRM** TITLE Detete NAME GROSS, CHARLES N JR. NAME 25 EAST 17TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ST CLOUD FL 34769 ☐ Change ☐ Addition **MGRM** ☐ Delete TITLE TITLE GROSS, CHARLES N III NAME NAME STREET ADDRESS STREET ADDRESS 25 EAST 17TH STREET CITY-ST-ZIP CITY-ST-ZIP ST. CLOUD FL 34769 TITLE Change ☐ Addition TITLE MGRM Delete MERM NAME NAME VENTURE HOLDINGS, INC. Venture Holdings, Inc. STREET ADDRESS STREET ADDRESS 7402 PARK SPRINGS CIRCLE 1947 Black Lake Blvd CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32835 Winter Garden, FL 34787 MGRM ☐ Change ☐ Addition ☐ Delete TITEF TITLE LANE, TIMOTHY G NAME NAME STREET ADDRESS STREET ADDRESS 3219 SOUTH ATLANTIC AVENUE CITY-ST-ZIP COCOA BEACH FL 32931 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TOTAL NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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.

ATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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