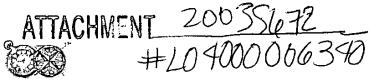
2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 26, 2006 8:00 am Secretary of State DOCUMENT #L0400006340 04-26-2006 90025 029 ****50.00 CORRENTI VENTURES, LLC Principal Place of Business Mailing Address 20035672 11351 COMPASS POINT DRIVE 11351 COMPASS POINT DRIVE FORT MYERS, FL 33908 FORT MYERS, FL 33908 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04142006 Chg-LLC CR2E083 (11/05) City & State City & State Applied For 4. FEI Number Not Applicable 20-0761173 Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Craig R. Hersch CORRENTI, ROBIN J Street Address (P.O. Box Number is Not Acceptable) 11351 COMPASS POINT DRIVE FORT MYERS, FL 33908 9100 College Pointe Ct. City Zip Code 33919 Fort Myers 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. 3-31-06 Craig R. Hersch SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. **MGRM** ☐ Delete TITLE ☐ Change ☐ Addition TITLE CORRENTI, ROBIN J .: NAME NAMÉ 11351 COMPASS POINT DRIVE STREET ADDRESS STREET ADDRESS FORT MYERS, FL 33908 🖑 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete □ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Detete TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Chappe ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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 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.

Robin J. Correnti

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

FILED



SHEPPARD, BRETT, STEWART, HERSCH & KINSEY P.A.

ATTORNEYS AT LAW FIRM ESTABLISHED 1924

JAY ANDREW BRETT JOHN F. STEWART + CRAIG R. HERSCH *^ D. HUGH KINSEY, JR. MICHAEL B. HILL 9100 COLLEGE POINTE COURT FORT MYERS, FLORIDA 33919 (239) 334 - 1141 PHONE (239) 334 - 3965 FAX

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OF COUNSEL
JOHN W. SHEPPARD *

* BOARD CERTIFIED: WILLS, TRUSTS & ESTATES

^ CERTIFIED PUBLIC ACCOUNTANT (FL)

+ ALSO ADMITTED IN IOWA

April 20, 2006

VIA CERTIFIED MAIL 7002 2410 0001 4458 1681

Division of Corporations P.O. Box 6478 Tallahassee, FL 32314

RE: CORRENTI VENTURES, LLC

Dear Sir or Madam:

Enclosed, please find the original Annual Report for the above referenced company. The completed annual report includes a check in the amount of \$50.00 payable to the Florida Department of State. I understand that you will be filing this before the May 1, 2006 deadline.

Should you have any questions or comments, please do not hesitate to contact me.

Kind regards,

SHEPPARD, BRETT, STEWART, HERSCH & KINSEY, P.A.

CRH/mkd

Enclosure