

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000007961

Entity Name: MAD VENTURES, LLC

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

2455 MORENO DR
9
FT MYERS, FL 33901 US

Current Mailing Address:

P.O. BOX 66792
ST PETE BEACH, FL 33736 US

New Principal Place of Business:

7217 GULF BLVD
14-122
ST PETE BEACH, FL 33706 US

New Mailing Address:

7217 GULF BLVD
14-122
ST PETE BEACH, FL 33706 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALES, MADELINE
2455 MORENO DR
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

ALES, MADELINE
7217 GULF BLVD
14-122
ST PETE BEACH, FL 33706 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:

03/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALES, MADELINE
Address: P.O. BOX 66792
City-St-Zip: ST PETE BEACH, FL 33736

Title: MGRM () Delete
Name: ALES, MADALINE A
Address: P.O. BOX 66792
City-St-Zip: ST PETE BEACH, FL 33736

ADDITIONS/CHANGES:

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 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: MADALINE ALES

MGRM

03/24/2009

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