

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039277

Entity Name: HTPY VENTURES, LLC

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

9658 EAGLE POINT LANE
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

9658 EAGLE POINT LANE
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 20-1208540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHRECKENGOST, TOO
9658 EAGLE POINT LANE
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

SCHRECKENGOST, TUOI
9658 EAGLE POINT LANE
LAKE WORTH, FL 33467 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: TUOI SCHRECKENGOST

01/04/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: TRAN-SON-TAY, ROGER
Address: 2426 NW 26TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGR () Delete
Name: BUI, YEN
Address: 7300 W. BUSH LAKE DRIVE
City-St-Zip: BLOOMINGTON, MN 55438

Title: MGR () Delete
Name: NGO, THUY
Address: 3640 CRESTRIDGE COURT
City-St-Zip: EAGAN, MN 55123

ADDITIONS/CHANGES:

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 Section 119.07(3)(i), 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: TUOI SCHRECKENGOST

MGR

01/04/2005

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