2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2008
Secretary of State

DOCUMENT# L04000068326

Entity Name: VERO BEACH VENTURES PAMRO, LLC

Current Principal Place of Business:

318 BOSTON POST RD
MADISON, CT 06443

New Principal Place of Business:

Current Mailing Address:

318 BOSTON POST RD
MADISON, CT 06443

New Mailing Address:

FEI Number: 14-1918071 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, FROHMAN
1236 HILLSBORO MILE APT. 501
HILLSBORO BEACH, FL 33062 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:	JEFFREY ROSENBERG, P, AMRO, LLC	
Address:	318 BOSTON POST RD	
City-St-Zip:	MADISON, CT 06443	
Title:	MGRM	( ) Delete
Name:	FROHMAN DAVIS, PAMRO, , LLC	
Address:	1236 HILLSBORO MILE APT. 501	
City-St-Zip:	HILLSBORO BEACH, FL 33062	
Title:	MGRM	( ) Delete
Name:	JEANINE RENZULLI, VE, RO BEACH VENTU R ES, LLC	
Address:	10714 VERSAILLES BLVD.	
City-St-Zip:	WELLINGTON, FL 33467	

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 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: JEFFREY ROSENBERG MGR 03/31/2008

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