


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 12, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L04000075776</b> 1. Entity Name <b>PROSPERITY VENTURE PARTNERS, LLC</b>	
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Principal Place of Business <b>7954 FAIRWAY LANE WEST PALM BEACH, FL 33412 US</b>	Mailing Address <b>7954 FAIRWAY LANE WEST PALM BEACH, FL 33412 US</b>
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03092008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>20-1768108</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>POSTEN, ROBERT J 7954 FAIRWAY LANE WEST PALM BEACH, FL 33412</b>
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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.  SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>	<b>U000000854735</b> <b>03/27/08-80021-002 138.75</b>
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR MAYES, JR, R. THOMAS 2595 NATVEES WAY PALM BEACH GARDENS, FL 33410</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR EILLIN, GARY 5380 N. OCEAN DRIVE, SUITE 101 WEST PALM BEACH, FL 33404</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR POSTEN, ROBERT 7954 FAIRWAY LANE WEST PALM BEACH, FL 33412</b>
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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.  <b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date: <b>3/8/08</b> <small>Daytime Phone #</small>
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