

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091224

Entity Name: PERDUE VENTURES, LLC

FILED
Jun 15, 2009
Secretary of State

Current Principal Place of Business:

3046 SAMARA DRIVE
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

3046 SAMARA DRIVE
TAMPA, FL 33618

New Mailing Address:

FEI Number: 20-2038273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NOVATT, JEFF M ESQ.
C/O CHEFFY, PASSIDOMO, ET AL
821 5TH AVENUE SOUTH, SUITE 201
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

PERDUE, JAMES A PRES.
3046 SAMARA DR.
TAMPA, FL 33618 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: JAMES A. PERDUE, JR.

06/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PERDUE, JAMES A JR.
Address: 3046 SAMARA DRIVE
City-St-Zip: TAMPA, FL 33618

Title: SEC () Delete
Name: HORAN, MICHELLE P
Address: 3046 SAMARA DR
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: PERDUE, JAMES A JR.
Address: 3046 SAMARA DRIVE
City-St-Zip: TAMPA, FL 33618

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: JAMES A. PERDUE, JR.

PRES

06/15/2009

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