

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013848

FILED
May 07, 2007
Secretary of State

Entity Name: HM VENTURES, LLC

Current Principal Place of Business:

990 BOULEVARD OF THE ARTS, UNIT 1502
SARASOTA, FL 34236

New Principal Place of Business:

990 BOULEVARD OF THE ARTS
UNIT 1502
SARASOTA, FL 34236

Current Mailing Address:

% DAVID A. HOLMES/FARR, FARR, EMERICH
99 NESBIT STREET
PUNTA GORDA, FL 33950

New Mailing Address:

C/O DAVID A. HOLMES
99 NESBIT STREET
PUNTA GORDA, FL 33950

FEI Number: 20-2362993 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:

HOLMES, DAVID A
FARR, FARR, EMERICH, HACKETT AND CARR, PA
99 NESBIT STREET
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

HOLMES, DAVID A
99 NESBIT STREET
PUNTA GORDA, FL 33950 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:

05/07/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOWARD, VICTOR N
Address: 990 BLVD. OF THE ARTS UNIT 1502
City-St-Zip: SARASOTA, FL 34286

ADDITIONS/CHANGES:

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: VICTOR N. HOWARD

MGR

05/07/2007

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