

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000018309

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Entity Name:** VENERATIO, LLC

**Current Principal Place of Business:**

6117 VIREORIDGE DRIVE  
LITHIA, FL 33547

**New Principal Place of Business:**

**Current Mailing Address:**

6117 VIREORIDGE DRIVE  
LITHIA, FL 33547

**New Mailing Address:**

**FEI Number:** 20-2386721

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LASMAN, JEFFREY M ESQ.  
C/O LASMAN LAW FIRM, P.A.  
1210 MILLENNIUM PARKWAY  
BRANDON, FL 33511 US

**Name and Address of New Registered Agent:**

LASMAN, JEFFREY M ESQ.  
C/O LASMAN LAW FIRM, P.A.  
6152 DELANCEY STATION STREET  
RIVERVIEW, FL 33569 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:

04/26/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KIMBLETON, STEPHEN R  
Address: 6117 VIREORIDGE DRIVE  
City-St-Zip: LITHIA, FL 33547

Title: MGRM ( ) Delete  
Name: PARKER, MELISA D  
Address: 6117 VIREORIDGE DRIVE  
City-St-Zip: LITHIA, FL 33547

**ADDITIONS/CHANGES:**

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 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: STEPHEN KIMBLETON

MGRM

04/26/2006

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