2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED DEPRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED Jan 22, 2007 8:00 am Secretary of State

772.778.2224

Daytime Phone #

DOCUMENT # L05000024281 1. Entity Name FORT DRUM VENTURE, LLC								01-22-2007	90150 ()43 ****5	0.00
Principal Place of Business Mailing Address											
6020 5TH S VERO BEACH		3	6020 5TH STREET, SW Vero Beach, FL 32968				4 10211011 011	80-91 81171 80171 88711 88711	th pa ir a nyu a	PIE (1881 1918) III	2 vál 141 1 v 11
2. Principal Place of Business - No P.O. Box #			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01172007	Chg-LLC	CR2E	083 (12/06)	
City & State			City & State				4. FEI Number 20-248			_ 	oplied For ot Applicable
Zip	ip Country		Zip Coun		try		5. Certificate of Status Desired 55.00 Additional Fee Required				
6. Name and Address of Current Registered Agent							7. Name and	Address of New F	Registered .	Agent	
FENNELL, TODD W ESQ					Name						
979 BEAC	HLAND B	LVD.	Street Address			ldress (P	(P.O. Box Number is Not Acceptable)				
VERO BEACH, FL 32963								_ .		1 7 . 0	.
,					City				FL	Zip Cod	le
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. It am familiar with, and accept the obligations of registered agent.											
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if applicable. (NOTE	: Registere	d Agent signature	e required v	rhen reinstating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2007											
Fi D:	ue by May	is \$50.00 y 1, 2007							ce check p a Departm	eayable to ent of Stat	e
9.	ue by May	MANAGING MEMBE	RS/MANAGERS	10.					a Departm	ent of Stat	е
D	MGR KAHLE, G	MANAGING MEMBERSEORGE A	ERS/MANAGERS	TITLE NAM STRE	i			Florid	a Departm	ent of Stat	e ☐ Addition
9. TITLE NAME STREET ADDRESS	MGR KAHLE, G 6020 5TH VERO BE MGR KAHLE, E 1599 GRA	MANAGING MEMBE BEORGE A I ST. SW IACH, FL 32968		TITLE NAM STRE CITY TITLE NAM STRE	E ET ADDRESS -ST-ZIP	→ /	599 Gr	Florid	a Departm	ent of Stat	
9. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	MGR KAHLE, C 6020 5TH VERO BE MGR KAHLE, E 1599 GRA VERO BE MGR SMITH, E 4776 OLE	MANAGING MEMBER GEORGE A I ST. SW FACH, FL 32968 DOLF AVCEWOOD LANE	☐ Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE	E EET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP	→ /	599 Gr	ADDITIONS	a Departm	Change	Addition
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