

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000052986

Entity Name: COLONEY VENTURES, LLC

FILED
Jul 06, 2006
Secretary of State

Current Principal Place of Business:

1507 E. LAS OLAS BLVD.
ATTN: SCOTT COLONEY
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

2810 E OAKLAND PARK BLVD
ATTN: SCOTT COLONEY
FT. LAUDERDALE, FL 33306

Current Mailing Address:

1507 E. LAS OLAS BLVD.
ATTN: SCOTT COLONEY
FT. LAUDERDALE, FL 33301

New Mailing Address:

2810 E OAKLAND PARK BLVD
ATTN: SCOTT COLONEY
FT. LAUDERDALE, FL 33306

FEI Number: 20-2952812 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:

DOUGLAS PAUL SOLOMON, ESQ
700 SOUTH FEDERAL HIGHWAY, SUITE 200
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: COLONEY, SCOTT
Address: 1507 E. LAS OLAS BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: COLONEY, SCOTT
Address: 2810 E OAKLAND PARK BLVD
City-St-Zip: FT. LAUDERDALE, FL 33306

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: SCOTT COLONEY

MGR

07/06/2006

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