2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 12, 2006
Secretary of State

DOCUMENT# L05000116791

Entity Name: VENTURA COMMERCE PARK, LLC

Current Principal Place of Business:

121 TRIPLE DIAMOND BLVD., STE. 8
N. VENICE, FL 34275

New Principal Place of Business:

Current Mailing Address:

121 TRIPLE DIAMOND BLVD., STE. 8
N. VENICE, FL 34275

New Mailing Address:

FEI Number: 20-3992661 **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:

DEVESO, CHRISTOPHER
121 TRIPLE DIAMOND BLVD., STE. 8
N. VENICE, FL 34275 US

Name and Address of New Registered Agent:

DEVESO, CHRISTOPHER
409 PICASSO DR
NOKOMIS, FL 34275 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: CHRISTOPHER A DEVESO 05/12/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR ( ) Change (X) Addition
Name: CHRISTOPHER A DEVESO,
Address: 409 PICASSO DR
City-St-Zip: NOKOMIS, FL 34275

Title: MR ( ) Change (X) Addition
Name: MCGINLEY, THOMAS P PARTNER
Address: 2020 CASEY KEY ROAD
City-St-Zip: NOKOMIS, FL 34275

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: CHRISTOPHER DEVESO MR 05/12/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date