## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000043659

Title:

Name:

Address:

City-St-Zip:

MGRM

MILLS, JOHN W

859 N MAIN ST

PROVIDENCE, RI 02904

( ) Delete

Entity Name: VENTURE WINDOW OF FLORIDA LLC

FILED Jan 10, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of E	New Principal Place of Business:	
720 NE 25	TH AVE		1193 ENTERPRISE DRIV	E	
SUITE 2 CAPE COF	RAL, FL 33446	6	SUITE 201 PORT CHARLOTTE, FL :	33953	
Current M	ailing Addres	ss:	New Mailing Address:	New Mailing Address:	
720 NE 25TH AVE				1193 ENTERPRISE DRIVE	
SUITE 2 CAPE CORAL, FL 33446			SUITE 201 PORT CHARLOTTE, FL :	SUITE 201 PORT CHARLOTTE, FL 33953	
FEI Number:	20-4771004	FEI Number Applied For (	) FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Ager	nt: Name and Address of No	Name and Address of New Registered Agent:	
The above	ĎCT. AWEST, FL 3		the purpose of changing its registered of	fice or registered agent, or both	
SIGNATUF					
	Electror	nic Signature of Registere	d Agent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM ( ) SCHULBAUM, I 859 N MAIN ST PROVIDENCE,	-	Title: ( ) ( Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM ( ) LOMBARDI, SC 129 ISLAND CT		Title: ( ) ( Name: Address:	Change ( ) Addition	

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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: BRUCE SCHULBAUM MR 01/10/2009