2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074944

FILED
Jan 14, 2008
Secretary of State

Entity Name: L.T.C. VENTURES L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
144 MORRIS LAKE DRIVE HAWTHORNE, FL 32640	

Current Mailing Address:	**New Mailing Address:**
P.O. BOX 1225 HAWTHORNE, FL 32640	

FEI Number: 51-0604211   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
MARKOWITZ, CHARICE 144 MORRIS LAKE DRIVE HAWTHORNE, FL 32640 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: _____

              Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title:	MGR ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MARKOWITZ, LUCILLE	Name:	
Address:	P.O. BOX 1225	Address:	
City-St-Zip:	HAWTHORNE, FL 32640	City-St-Zip:	

Title:	MGR ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MARKOWITZ, CHARICE	Name:	
Address:	P.O. BOX 1225	Address:	
City-St-Zip:	HAWTHORNE, FL 32640	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	SCHEERER, BERTINA	Name:	
Address:	519 HIMALAYAN STREET	Address:	
City-St-Zip:	INTERLACHEN, FL 32148	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MARKOWITZ, LUANNE	Name:	
Address:	1510 SE 36TH AVENUE	Address:	
City-St-Zip:	OCALA, FL 34471	City-St-Zip:	

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.

SIGNATURE: CHARICE MARKOWITZ   MGR   01/14/2008
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date