2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000086328

Entity Name: QUADVENTURE, LLC

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

300 LAKE ELLA ROAD FRUITLAND PARK, FL 34731

Current Mailing Address: New Mailing Address:

300 LAKE ELLA ROAD FRUITLAND PARK, FL 34731

FEI Number: 20-5520425 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:

WILLIAMS, ROBERT Q ESQ. 380 W. ALFRED STREET TAVARES, FL 32778 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: MGRM () Delete Title: MGRM (X) Change () Addition

Name: ADMONIUS, ANN K Name: VALDEZ, ANITA

 Address:
 10760 WEST HIGHWAY 326
 Address:
 300 LAKE ELLA RD

 City-St-Zip:
 OCALA, FL 33482
 City-St-Zip:
 FRUITLAND PARK, FL 34731

Title: MGRM () Delete Title: () Change () Addition

 Name:
 ADMONIUS, TIMOTHY J
 Name:

 Address:
 10760 WEST HIGHWAY 326
 Address:

 City-St-Zip:
 OCALA, FL 33482
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 COHRN, KENNETH
 Name:

 Address:
 10760 WEST HIGHWAY 326
 Address:

 City-St-Zip:
 OCALA, FL 33482
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 COLEMAN-COHRN, DESIREE
 Name:

 Address:
 15714 ACORN CIRCLE
 Address:

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GINN, PAMELA E
 Name:

 Address:
 9680 N.W. 80TH AVENUE
 Address:

 City-St-Zip:
 OCALA, FL 34482
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 HAHN, JACK K
 Name:

 Address:
 9680 N.W. 80TH AVENUE
 Address:

 City-St-Zip:
 OCALA, FL 34482
 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: ANITA VALDEZ MGRM 03/19/2009