

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000052424

FILED  
Mar 08, 2008  
Secretary of State

Entity Name: INTERPOINT VENTURES, LLC

**Current Principal Place of Business:**

401 S HOWARD AVE #106-361  
TAMPA, FL 33606

**New Principal Place of Business:**

5011 E BUSCH BLVD  
TAMPA, FL 33617

**Current Mailing Address:**

401 S HOWARD AVE #106-361  
TAMPA, FL 33606

**New Mailing Address:**

5011 E BUSCH BLVD  
TAMPA, FL 33617

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONLEY, REED B  
4222 W. BAY VIEW AVE  
TAMPA, FL 33611 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: MGRM ( ) Delete  
Name: CONLEY, REED B  
Address: 401 S HOWARD AVE #106-361  
City-St-Zip: TAMPA, FL 33606 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CONLEY, REED B  
Address: 5011 E BUSCH BLVD  
City-St-Zip: TAMPA, FL 33617 US

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: REED CONLEY

MGRM

03/08/2008

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