

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055770

Entity Name: ACCF VENTURES, LLC

FILED
May 29, 2008
Secretary of State

Current Principal Place of Business:

6542 HYPOLUXO RD.
SUITE # 197
LAKE WORTH, FL 33467

Current Mailing Address:

6542 HYPOLUXO RD.
SUITE # 197
LAKE WORTH, FL 33467

New Principal Place of Business:

6586 HYPOLUXO RD.
SUITE # 197
LAKE WORTH, FL 33467

New Mailing Address:

6586 HYPOLUXO RD.
SUITE # 197
LAKE WORTH, FL 33467

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

COLLINS, ADRIAN
6542 HYPOLUXO RD.
SUITE # 197
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

COLLINS, ADRIAN
6586 HYPOLUXO RD.
SUITE # 197
LAKE WORTH, FL 33467 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:

05/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLLINS, ADRIAN
Address: 6542 HYPOLUXO RD. BOX 197
City-St-Zip: LAKE WORTH, FL 33467

Title: MGRM () Delete
Name: FLETCHER, CAROLE
Address: 6542 HYPOLUXO RD. BOX 197
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLLINS, ADRIAN
Address: 6586 HYPOLUXO RD. BOX 197
City-St-Zip: LAKE WORTH, FL 33467

Title: MGRM (X) Change () Addition
Name: FLETCHER, CAROLE
Address: 6586 HYPOLUXO RD. BOX 197
City-St-Zip: LAKE WORTH, FL 33467

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: ADRIAN COLLINS

MGRM

05/29/2008

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