

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000108325

Entity Name: SOF VENTURES, LLC

FILED  
Jul 08, 2008  
Secretary of State

## Current Principal Place of Business:

30 TIMBERLAND CIRCLE SOUTH  
FORT MYERS, FL 33919

## New Principal Place of Business:

2700-6 EVANS AVENUE  
FORT MYERS, FL 33901

## Current Mailing Address:

30 TIMBERLAND CIRCLE SOUTH  
FORT MYERS, FL 33919

## New Mailing Address:

2700-6 EVANS AVENUE  
FORT MYERS, FL 33901

FEI Number: 26-1317642      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410      US

## Name and Address of New Registered Agent:

TOFFOLI, JAMES P MGRM  
2700-6 EVANS AVENUE  
FORT MYERS, FL 33901      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: JAMES P. TOFFOLI

07/08/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM      ( ) Delete  
Name: TOFFOLI, JAMES P  
Address: 30 TIMBERLAND CIRCLE SOUTH  
City-St-Zip: FORT MYERS, FL 33919

Title: MGRM      ( ) Delete  
Name: THOMPSON, WILLIAM B IV  
Address: 30 TIMBERLAND CIRCLE SOUTH  
City-St-Zip: FORT MYERS, FL 33919

Title: MGRM      ( ) Delete  
Name: THOMPSON, DANIEL EVAN  
Address: 30 TIMBERLAND CIRCLE SOUTH  
City-St-Zip: FORT MYERS, FL 33919

## ADDITIONS/CHANGES:

Title: MGRM      (X) Change ( ) Addition  
Name: TOFFOLI, JAMES P  
Address: 2700-6 EVANS AVENUE  
City-St-Zip: FORT MYERS, FL 33901

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES P. TOFFOLI

MGRM

07/08/2008

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