

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000014872

**Entity Name:** SHAMROCK VENTURES, LLC

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

548 CUTTER LANE  
LONGBOAT KEY, FL 34228

**New Principal Place of Business:**

**Current Mailing Address:**

548 CUTTER LANE  
LONGBOAT KEY, FL 34228

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

DOERR, KENNETH D  
1990 MAIN STREET, SUITE 1700  
SARASOTA, FL US

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

LYNCH, CHRISTINE  
548 CUTTER LANE  
LONGBOAT KEY, FL 34228 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: CHRISTINE LYNCH

04/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: LYNCH, CHRISTINE  
Address: 548 CUTTER LANE  
City-St-Zip: LONGBOAT KEY, FL 34228 US

I hereby 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: CHRISTINE LYNCH

PRES

04/16/2012

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