


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 20, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L99000000296</b> 1. Entity Name <b>REVENUE GLOBAL VENTURES, L.L.C.</b>	
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Principal Place of Business <b>464 GOLDEN GATE PT APT 601 SARASOTA, FL 34236</b>	Mailing Address <b>464 GOLDEN GATE PT APT 601 SARASOTA, FL 34236</b>
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02082007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number <b>65-0894957</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>SHEA, NORM 800 SOUTH OSPREY AVENUE SUPLEE &amp; SHEA PA SARASOTA, FL 34236-7834</b>
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**DO NOT WRITE  
IN THIS SPACE**

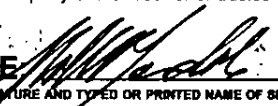
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR LONSDALE, KRISTY K 464 GOLDEN GATE PT, APT 601 SARASOTA, FL 34236</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR LONSDALE, ROBERT D 464 GOLDEN GATE PT, APT 601 SARASOTA, FL 34236</b>
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.		
<b>SIGNATURE</b>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<b>Robert D. Lonsdale</b> <small>Date</small>	<b>4/15/07</b> <small>Daytime Phone #</small>

**941-366-6326**