

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002994

FILED  
Jun 30, 2008  
Secretary of State

**Entity Name:** PRIME VENTURE REALTY ASSOCIATES LLC

**Current Principal Place of Business:**

2713 PARK MEADOW DRIVE  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

2713 PARK MEADOW DRIVE  
VALRICO, FL 33594

**New Mailing Address:**

29 PITNEY LANE  
JACKSON, NJ 08527

FEI Number: 22-3562485      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

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

CAMPBELL, ULY  
2713 PARK MEADOW DRIVE  
VALRICO, FL 33594      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: CAMPBELL, ULY  
Address: 2713 PARK MEADOW DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: MGRM      ( ) Delete  
Name: CAMPBELL, KEMELIA  
Address: 2713 PARK MEADOW DRIVE  
City-St-Zip: VALRICO, FL 33594

**ADDITIONS/CHANGES:**

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: ULY CAMPBELL

MGM

06/30/2008

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