2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # M05000004656

1. Entity Name
SCOTT VENTURES, LLC

Principal Place of Business	Mailing Address
1430 TURNBERRY COURT FORT WAYNE, IN 46814	1430 TURNBERRY COURT FORT WAYNE, IN 46814

DO NOT WRITE IN THIS SPACE

01092006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number | Applied For
NOT APPLICABLE | Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

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6. Name and Address of Current Registered Agent

SANDLER, HOWARD B
246 PESARO DRIVE
NORTH VENICE, FL 34275

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2006

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SCOTT, AMY S
STREET ADDRESS	1430 TURNBERRY COURT
CITY-ST-ZIP	FORT WAYNE, IN 46814
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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NAME	
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CITY-ST-ZIP	

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02/10/06-80040-016 50.00

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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.

SIGNATURE: _Amy A Scott_   _1/11/06_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #