

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000000113

1. Entity Name
VENTURE IN PROPERTIES, LLC



Principal Place of Business

29 EMMONS DRIVE, SUITE E-10
PRINCETON, NJ 08540

Mailing Address

29 EMMONS DRIVE, SUITE E-10
PRINCETON, NJ 08540



01312007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number

20-0482669

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARD, SHIRLEY & HARTMAN, P.A.
207 WEST PARK AVE., SUITE B
TALLAHASSEE, FL 32301

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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

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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LAZZARO, GREG
526 LIBERTY DRIVE
YARDLEY, PA 19067

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
COOPER, STEVE
1223 PARK STREET
ROBBINSVILLE, NJ 08691

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

2/13/2007

609 720 1885