2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # M06000003498

1. Entity Name

LEO VENTURES MEMBER, LLC



FILED Apr 26, 2007 08:00 A Secretary of State

Principal Place of Business

440 ROYAL PALM WAY, SUITE 202 PALM BEACH, FL 33480 Mailing Address

440 ROYAL PALM WAY, SUITE 202 PALM BEACH, FL 33480



01152007 No Chg-LLC

CR2E083 (11/05)

Fee Required

4. FEI Number Applied For 20-5075982 Not Applicable

5. Certificate of Status Desired \$5.00 Additional

6. Name and Address of Current Registered Agent

JONES FOSTER SERVICE, LLC 505 SOUTH FLAGLER DRIVE SUITE 1100 WEST PALM BEACH, FL 33401

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	Signature, typed or printed name of registered agent and title if applicable,	(NOTE, Registered Agent signature required when reinstating)	DATE	
SIGNATURE				
	ne obligations of registered agent.	ariging its registered office or registered agent, or both	, in the State of Horida. Tash tartinal with and accept	
R 1	he above named entity submits this statement for the purpose of ch	ranging ite registered office or registered agent, or both	in the State of Florida. I am familiar with and eccent	

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

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARE INVESTMENTS INC. 440 ROYAL PALM WAY, SUITE 202 PALM BEACH, FL 33480
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11. 1 hereby of indicated	certify that the information supplied with this filing does not qualify for the ex on this report is true and accurate and that my signature shall have the sar

U00000734426 05/03/07-80124-025 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 reserver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: __

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

4/24/07

Daytime Phone #