2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# M06000005092

Entity Name: VENTAIRE, LLC

Current Principal Place of Business:

1019 E NORTH STREET
OTTAWA, KS 66067

New Principal Place of Business:

Current Mailing Address:

1019 E NORTH STREET
PO BOX 1050
OTTAWA, KS 66067

New Mailing Address:

FEI Number: 43-1989547 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KING, LONNIE
11290 BENT PINE DRIVE
FT MYERS, FL 33913 US

Name and Address of New Registered Agent:

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: MGR ( ) Delete
Name: WEAVER, JEFFREY A
Address: 4345 SOUTH 93RD EAST AVE
City-St-Zip: TULSA, OK 74147

Title: MGR ( ) Delete
Name: KING, LONNIE L
Address: 1019 E NORTH STREET
City-St-Zip: OTTAWA, KS 66067

Title: MGR ( ) Delete
Name: MARX, PAUL
Address: 1019 E NORTH STREET
City-St-Zip: OTTAWA, KS 66067

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: MARX, PAUL E
Address: 1019 E NORTH STREET
City-St-Zip: OTTAWA, KS 66067

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: PAUL E. MARX MGR 01/16/2009

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