

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000297

FILED  
Apr 13, 2006  
Secretary of State

Entity Name: VENTURE RESOURCES GROUP, LLC

**Current Principal Place of Business:**

4224 W. HENDERSON BLVD.  
ATTENTION: LEGAL DEPARTMENT  
TAMPA, FL 336295611

**New Principal Place of Business:**

**Current Mailing Address:**

4224 W. HENDERSON BLVD.  
ATTENTION: LEGAL DEPARTMENT  
TAMPA, FL 336295611

**New Mailing Address:**

FEI Number: 59-3445904

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DOMINGUEZ, JOSEPH C ESQ  
4224 W. HENDERSON BLVD  
TAMPA, FL 336295611 US

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

PHILLIPS, JANE ESQ  
4224 W. HENDERSON BLVD  
TAMPA, FL 336295611 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: JANE PHILLIPS

04/13/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HARDIN, HENRY C III  
Address: 2435 TECH CENTER PARKWAY  
City-St-Zip: LAWRENCEVILLE, GA 30043

Title: MGR (X) Delete  
Name: DOMINGUEZ, JOSEPH C ESQ  
Address: 4224 W HENDERSON BLVD  
City-St-Zip: TAMPA, FL 336295611

**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 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: HENRY C HARDIN, III

MGR

04/13/2006

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