## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000117263

Entity Name: FAMILY VENTURES INC.

FILED Apr 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11482 SUMMIT ROCK CT 15 ROSE CREEK DRIVE PARRISH, FL 34219 COVINGTON, GA 30014

Current Mailing Address: New Mailing Address:

11482 SUMMIT ROCK CT 15 ROSE CREEK DRIVE PARRISH, FL 34219 COVINGTON, GA 30014

FEI Number: 20-0297444 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MARTINEZ, WENDI

11482 SUMMIT ROCK CT

PARRISH, FL 34219 US

MARTINEZ, WENDI

15 ROSE CREEK DRIVE

COVINGTON GA, FL 30014 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: WENDI MARTINEZ 04/20/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 LAVALLEE, HELEN R
 Name:
 LAVALLEE, HELEN R

 Address:
 11482 SUMMIT ROCK CT
 Address:
 45 ROSE CREEK DRIVE

 City-St-Zip:
 PARRISH, FL 34219
 City-St-Zip:
 COVINGTON, GA 30014

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition
Name: MARTINEZ WEND! Name: MARTINEZ WEND!

 Name:
 MARTINEZ, WENDI
 Name:
 MARTINEZ, WENDI

 Address:
 11482 SUMMIT ROCK CT
 Address:
 15 ROSE CREEK DRIVE

 City-St-Zip:
 PARRISH, FL 34219
 City-St-Zip:
 COVINGTON, GA 30014

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

 Name:
 MARTINEZ, JOSE
 Name:
 MARTINEZ, JOSE

 Address:
 11482 SUMMIT ROCK CT
 Address:
 15 ROSE CREEK DRIVE

 City-St-Zip:
 PARRISH, FL 34219
 City-St-Zip:
 COVINGTON, GA 30014

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENDI MARTINEZ VP 04/20/2007