## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000016276

FILED Apr 08, 2006 Secretary of State

Entity Name: VENTUR RESEARCH AND DEVELOPMENT CORPORATION

Current Principal Place of Business:				New Principal Place of Business:		
340 MYSTICAL WAY SAINT AUGUSTINE, FL 32080						
Current Mailing Address:			New N	New Mailing Address:		
340 MYSTICAL WAY SAINT AUGUSTINE, FL 32080						
FEI Number: 59-3324370 FEI Number Applied For ( ) FEI Num			FEI Number Not	mber Not Applicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CURRIE, ALLYSON B ESQ. 1200 PLANTATION ISLAND DR S STE 140 ST. AUGUSTINE, FL 32080 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:						
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:			ADDIT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S () BRYAN, KAREN 340 MYSTICAL SAINT AUGUST	WAY	Title: Name: Address City-St-:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DP () GIBBONEY, JAI 3910 DIAL MILL CONYERS, GA	ROAD	Title: Name: Address City-St		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DVPT () BRYAN, WILLIA 340 MYSTICAL SAINT AUGUST	WAY	Title: Name: Address City-St		DVPT (X) Change ( ) Addition BRYAN, WILLIAM J 340 MYSTICAL WAY ST. AUGUSTINE, FL 32080	
Title: Name: Address: City-St-Zip:	LEE, WALTER	Delete NG KWANG STREET N, NEI HUY	Title: Name: Address City-St-		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () NESBITT, STEV 12 STUYESANT ASHEVILLE, NO	ROAD	Title: Name: Address City-St		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () BROWN, WOOI 250 FIDDLER F SAINT AUGUST	PT	Title: Name: Address City-St-		D (X) Change ( ) Addition BROWN, WOODROW 6606 ASHMORE LANE TYLER, TX 75703	
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						

SIGNATURE: WILLIAM J. BRYAN

Electronic Signature of Signing Officer or Director

above, or on an attachment with an address, with all other like empowered.

Date

04/08/2006

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