

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000234

Entity Name: CS VENTURES, LLC

Current Principal Place of Business:

455 SOUTH LEGACY TRAIL
ST. AUGUSTINE, FL 32092

Current Mailing Address:

455 SOUTH LEGACY TRAIL
ST. AUGUSTINE, FL 32092

FEI Number: 06-1501645

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Authorized Person(s) Detail :

Title MGR
Name HASKELL, MACDONALD T
Address 24636 HARBOUR VIEW DRIVE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title MGR
Name MURRAY, ANDREW T
Address 455 S LEGACY TRAIL
City-State-Zip: ST. AUGUSTINE FL 32092

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MACDONALD HASKELL

MANAGER

01/10/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date