


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 JUL -3 PM 1:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000095783		
1. Entity Name VEN ENTERPRISES, INC.		

Principal Place of Business 118 N MAIN ST ELMIRA, NY 14901	Mailing Address 118 N MAIN ST ELMIRA, NY 14901
--	--

DO NOT WRITE IN THIS SPACE

03/19/06 80046 025 \$150.00
 07032006 No Chg-P CR2E034 (11/05)

4. FFI Number 43-1990889	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KENNEDY, PAUL ROGERS
250 NE 12TH ST
DELRAY BEACH, FL 33444**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
(Signature typed or printed name of registered agent and title of institution) (Signature of registered agent. Signature required when registering)

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DV NUVILL, ERIC B 408 W WATER ST ELMIRA, NY 14901
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D NUVILL, VICKI L 408 W WATER ST ELMIRA, NY 14901
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vicki L Nuvill Vicki L Nuvill 7/3/06 607-732-2226
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Date: 12/31/06)