

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051784

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: NAZZARO O&G NUMBER ONE, LLC

**Current Principal Place of Business:**

95496 CAPTAINS WAY  
FERNANDINA BEACH, FL 32034 US

**New Principal Place of Business:**

4646 CARLTON DUNE DRIVE  
UNIT #5  
FERNANDINA BEACH, FL 32034 US

**Current Mailing Address:**

95496 CAPTAINS WAY  
FERNANDINA BEACH, FL 32034 US

**New Mailing Address:**

1417 SADLER ROAD, #377  
FERNANDINA BEACH, FL 32034 US

FEI Number: 20-0605399

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAZZARO, TRACY A  
95496 CAPTAINS WAY  
FERNANDINA BEACH, FL 32034 US

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

NAZZARO, TRACY A  
4646 CARLTON DUNE DRIVE  
UNIT #5  
FERNANDINA BEACH, FL 32034 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: TRACY A NAZZARO

04/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SE NAZZARO/BEN/C-TTE, /NAZZARO LIVIN G TRUST  
Address: 95496 CAPTAINS WAY  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: MGRM ( ) Delete  
Name: TA NAZZARO/BEN/C-TTE, /NAZZARO LIVIN G TRUST  
Address: 95496 CAPTAINS WAY  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SE NAZZARO/BEN/C-TTE, /NAZZARO LIVIN G TRUST  
Address: 4646 CARLTON DUNE DRIVE, UNIT #5  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: MGRM (X) Change ( ) Addition  
Name: TA NAZZARO/BEN/C-TTE, /NAZZARO LIVIN G TRUST  
Address: 4646 CARLTON DUNE DRIVE, UNIT #5  
City-St-Zip: FERNANDINA BEACH, FL 32034 US

I hereby certify that the information supplied with this filing does not qualify 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: TRACY A NAZZARO

MGRM

04/30/2008

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