


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 08, 2007 08:00 A
Secretary of State

DOCUMENT # L04000050015
 1. Entity Name
 NEXTECH NORTHEAST, LLC



Principal Place of Business
 445 WEST DRIVE, SUITE 101
 MELBOURNE, FL 32904

Mailing Address
 445 WEST DRIVE, SUITE 101
 MELBOURNE, FL 32904

DO NOT WRITE IN THIS SPACE



07022007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1322017	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF ORLANDO
 300 SOUTH ORANGE AVE., SUITE 1000 (JGH)
 ORLANDO, FL 32801-5403

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by September 14, 2007

U00000771781
 08/08/07-80008-014 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BULL, ROBERT A CEO 445 WEST DRIVE, STE 101 MELBOURNE, FL 329041060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ARES HOLDINGS LLC 445 WEST DRIVE, STE 101 MELBOURNE, FL 329041060
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. 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 is true and accurate and that my 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: Kathy B. Smith, CFO Date: 7/9/07 Daytime Phone #: 321 727 2865

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE