

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000046350

FILED
Apr 28, 2009
Secretary of State

Entity Name: C.NAST, LLC

Current Principal Place of Business:

2814 S.W. 13TH STREET
GAINESVILLE, FL 32607 US

New Principal Place of Business:

2814 S.W. 13TH STREET
GAINESVILLE, FL 32608 US

Current Mailing Address:

2814 S.W. 13TH STREET
GAINESVILLE, FL 32607 US

New Mailing Address:

2814 S.W. 13TH STREET
GAINESVILLE, FL 32608 US

FEI Number: 20-4812089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AVERA, MARK
2814 S.W. 13TH STREET
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

AVERA, MARK
2814 S.W. 13TH STREET
GAINESVILLE, FL 32608 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:

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AVERA, MARK
Address: 209 N.W. 117TH WAY
City-St-Zip: GAINESVILLE, FL 32607 US

Title: MGRM () Delete
Name: NEFF, JAMES A
Address: 9809 N.W. 59TH TERRACE
City-St-Zip: GAINESVILLE, FL 32653 US

Title: MGRM () Delete
Name: SHERMYEN, JOHN
Address: 2814 S.W. 13TH STREET
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGRM () Delete
Name: TEEGEN, JOHN
Address: 8440 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARK A. AVERA

MGRM

04/28/2009

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