2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002434

Entity Name: ADESTA, LLC

Apr 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1200 LANDMARK CENTER, SUITE 1300 OMAHA, NE 68102

Current Mailing Address: New Mailing Address:

1200 LANDMARK CENTER, SUITE 1300 OMAHA, NE 68102

FEI Number: 43-1965877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: () Change () Addition () Delete

SOMMERFELD, ROBERT E Name: Name: 1200 LANDMARK CENTER, SUITE 1300 Address: Address:

City-St-Zip: OMAHA, NE 68102 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

MCCARTHY, MICHAEL Name: MYERS, BOB Name:

Address: 1125 S 103RD STREET STE 450 Address: 1601 DODGE STREET, SUITE 3800

City-St-Zip: OMAHA, NE 681241071 City-St-Zip: OMAHA, NE 68102

Title: MGR () Delete Title: MGR (X) Change () Addition

O'BRIAN, DENNIS LITTLE, GEORGE Name: Name: 5480 INDIAN HILLS DRIVE Address: 1125 S 103RD STREET STE 450 Address:

City-St-Zip: OMAHA, NE 681241071 City-St-Zip: OMAHA, NE 68114

Title: MGR () Delete Title: () Change () Addition

THOMPSON, HAROLD M Name: Name: Address: **785 SE 55 STREET** Address: City-St-Zip: PLEASANT, HILL, IA 50327 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

BELL, RICHARD R PEARSON, LARRY Name: Name:

8404 INDIAN HILLS DRIVE 1044 N. 115 STREET, SUITE 400 Address: Address:

City-St-Zip: OMAHA, NE 681144049 City-St-Zip: OMAHA, NE 68154

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT SOMMERFELD 04/04/2007