## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000118101

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

MGR

MGR

HARIRI, AZADEH

HARIRI, FARZAM

1169 TRINITY DRIVE

MENLO PARK, CA 94025

1169 TRINITY DRIVE

MENLO PARK, CA 94025

() Delete

( ) Delete

Entity Name: NHI NEWBERRY PROPERTY HOLDINGS LLC

FILED Mar 21, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 417 E JACKSON ST ORLANDO, FL 32801 **Current Mailing Address: New Mailing Address:** 417 E JACKSON ST ORLANDO, FL 32801 FEI Number: 33-1127694 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: NADJAFI, JOHN R ESQ NADJAFI, JOHN R ESQ 9751 EAST BAY HARBOR DIRVE, UNIT 1104 100 SOUTH EOLA DR BAY HARBOR ISLANDS, FL 33154 1110 ORLANDO, FL 32801 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: 03/21/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete NADJAFI, HEIDI Name: Name: 417 E JACKSON STREET Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: MGR () Delete Title: () Change () Addition NADJAFI, MORTEZA JR Name: Name: Address: 417 E JACKSON STREET Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip:

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.

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

() Change () Addition

() Change () Addition

SIGNATURE: HEIDI NADJAFI CFO 03/21/2007