

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000057868

Entity Name: 1230 NPHR LLC

FILED  
Apr 27, 2009  
Secretary of State

**Current Principal Place of Business:**

1501 ORANGE AVE.  
TAVARES, FL 32778

**New Principal Place of Business:**

**Current Mailing Address:**

1501 ORANGE AVE.  
TAVARES, FL 32778

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

CLEMENT, G. EDWARD  
308 EAST FIFTH AVENUE  
MOUNT DORA, FL 32757 US

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

LUCE, PATRICK  
1501 ORANGE AVE  
TAVARES, FL 32778 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: PATRICK LUCE

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LUCE, JACK E  
Address: 725 HAMLIN DRIVE  
City-St-Zip: OCOEE, FL 34761

Title: MGR ( ) Delete  
Name: LUCE, PATRICK M  
Address: 1501 ORANGE AVE.  
City-St-Zip: TAVARES, FL 32778

**ADDITIONS/CHANGES:**

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: PATRICK LUCE

MGR

04/27/2009

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