

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000046350

**Entity Name:** C.NAST, LLC

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number:** 20-4812089

**Certificate of Status Desired:** No

**Name and Address of Current 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name AVERA, MARK  
Address 209 N.W. 117TH WAY  
City-State-Zip: GAINESVILLE FL 32607

Title MGRM  
Name NEFF, JAMES A  
Address 9809 N.W. 59TH TERRACE  
City-State-Zip: GAINESVILLE FL 32653

Title MGRM  
Name SHERMYEN, JOHN  
Address 2814 S.W. 13TH STREET  
City-State-Zip: GAINESVILLE FL 32608

Title MGRM  
Name TEEGEN, JOHN  
Address 8440 A1A SOUTH  
City-State-Zip: ST. AUGUSTINE FL 32080

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARK AVERA

MGRM

01/08/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date