

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002495

FILED
Feb 13, 2009
Secretary of State

Entity Name: NASSAU COMMERCIAL PROPERTIES LLC

Current Principal Place of Business:

28 SOUTH 10TH STREET
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

2626 COUNTESS OF EGMONT STREET
FERNANDINA BEACH, FL 32034

Current Mailing Address:

PO BOX 15163
FERNANDINA BEACH, FL 32035

New Mailing Address:

FEI Number: 59-3631524 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PETERS, ROBERT
28 SOUTH 10TH STREET
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: PETERS, ROBERT
Address: 2626 COUNTESS OF EGMONT ST
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM () Delete
Name: PETERS, JODY
Address: 2626 COUNTESS OF EGMONT ST
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM () Delete
Name: PETERS, JEFF
Address: 7018 W. GATE DR.
City-St-Zip: TIFTON, GA 31794

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:

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: ROBERT PETERS

MGRM

02/13/2009

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