

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013303

FILED
Jul 02, 2007
Secretary of State

Entity Name: NATHAN PROPERTIES, L.L.C.

Current Principal Place of Business:

2600 KUNZE AVE.
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

2600 KUNZE AVE.
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-3679128 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ADAMS, MARK F
5316 E. IRLO BRONSON MEMORIAL HIGHWAY
ST. CLOUD, FL 34771 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:

Title: MGRM () Delete
Name: ADAMS, MARK F
Address: 2600 KUNZE AVE.
City-St-Zip: ORLANDO, FL 32806

Title: MGRM () Delete
Name: WETZEL, JOHN P JR
Address: 8425 GOLD KIST BLVD
City-St-Zip: LIVE OAK, FL 32064

Title: M () Delete
Name: ADAMS, MICHAEL A
Address: 2441 WOODWAY DR
City-St-Zip: ORLANDO, FL 32837

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: MARK F. ADAMS

MGRM

07/02/2007

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