

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003163

Entity Name: NC SCHAFFER FLORIDA, LLC

FILED
Jan 23, 2007
Secretary of State

Current Principal Place of Business:

9590 LANTERN BAY CIR.
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

9590 LANTERN BAY CIR.
WEST PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 01-0596748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHAFFER, MR. & MRS. N
9590 LANTERN BAY CIR.
WEST PALM BEACH, FL 33411 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: P () Delete
Name: SCHAFFER, NATHAN
Address: 9590 LANTERN BAY CIR.
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VS () Delete
Name: SCHAFFER, CLAUDETTE
Address: 9590 LANTERN BAY CIR.
City-St-Zip: WEST PALM BEACH, FL 33411

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 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: NATHAN SCHAFFER

PRES

01/23/2007

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