

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016060

FILED  
Feb 01, 2006  
Secretary of State

**Entity Name:** NATIONAL ASSET MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

5192 10TH AVENUE NORTH  
GREENACRES, FL 33463 US

**New Principal Place of Business:**

**Current Mailing Address:**

5192 10TH AVENUE NORTH  
GREENACRES, FL 33463 US

**New Mailing Address:**

**FEI Number:** 33-1016095

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FEINMEL, HOWARD  
5192 10TH AVE NORTH  
GREENACRES, FL 33463 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: FEINMEL, HOWARD  
Address: 5895 CATESBY STREET  
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGRM ( ) Delete  
Name: CARLIN, DONNA  
Address: 10693 ANNA MARIE DRIVE  
City-St-Zip: GLEN ALLEN, VA 23060 US

**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: HOWARD FEINMEL

MGRM

02/01/2006

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