

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90365 037 ****50.00

DOCUMENT # L02000016060

1. Entity Name
NATIONAL ASSET MANAGEMENT, L.L.C.



Principal Place of Business
5192 10TH AVENUE NORTH
GREENACRES, FL 33463 US

Mailing Address
5192 10TH AVENUE NORTH
GREENACRES, FL 33463 US

60038514



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2200 North Federal Highway #214
Boca Raton, FL 33431-7764

2200 North Federal Highway #214
Boca Raton, FL 33431-7764

n4032007 Chg-LLC CR2E083 (12/06)

FEI Number
33-1016095

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FEINMEL, HOWARD
5192 10TH AVE NORTH
GREENACRES, FL 33463

7. Name and Address of New Registered Agent

Name Feinmel Howard
Street Address (P.O. Box Number is Not Acceptable)
2200 North Federal Highway #214
Boca Raton, FL 33431-7764
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent, and date, if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

Filing Fee is \$50.00
Due by May 1, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME FEINMEL, HOWARD ☐ Delete
STREET ADDRESS 5895 CATESBY STREET
CITY- ST- ZIP BOCA RATON, FL 33433

TITLE MGRM
NAME CARLIN, DONNA ☐ Delete
STREET ADDRESS 10693 ANNA MARIE DRIVE
CITY- ST- ZIP GLEN ALLEN, VA 23060

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY- ST- ZIP

10. ADDITIONS/CHANGES

TITLE MGRM
NAME Feinmel Howard ☒ Change ☐ Addition
STREET ADDRESS 2200 North Federal Highway #214
CITY- ST- ZIP Boca Raton, FL 33431-7764 ☐ Change ☐ Addition

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #