

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 13, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000017877

1. Entity Name

NIMBUS FIDELITY TRUST, LLC



Principal Place of Business

2328 TENTH AVENUE NORTH, SUITE 403
LAKE WORTH, FL 33461-6606

Mailing Address

2328 TENTH AVENUE NORTH, SUITE 403
LAKE WORTH, FL 33461-6606



02252008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

51-0418793

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUKIN, ROGER
2328 TENTH AVENUE NORTH, SUITE 403
LAKE WORTH, FL 33461-6606

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IN THIS SPACE**

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000856892
03/28/08-80030-011 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	JAMES B. RUKIN REVOCABLE TRUST
STREET ADDRESS	2328 10TH AVE. NORTH, SUITE 403
CITY-ST-ZIP	LAKE WORTH, FL 334066606
TITLE	MGRM
NAME	JULIA R. RUKIN REVOCABLE TRUST
STREET ADDRESS	2328 10TH AVE. NORTH, SUITE 403
CITY-ST-ZIP	LAKE WORTH, FL 334066606
TITLE	MGR
NAME	RUKIN, ROGER B
STREET ADDRESS	2328 10TH AVE. NORTH, SUITE 403
CITY-ST-ZIP	LAKE WORTH, FL 334066606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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, OR AUTHORIZED REPRESENTATIVE

ROGER B. RUKIN 3/7/08 561 586-0100

Date

Daytime Phone #