

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020350

Entity Name: NELDA JACKSON, P.L.L.C.

FILED  
Feb 27, 2007  
Secretary of State

**Current Principal Place of Business:**

4400 HIGHWAY 20 EAST  
SUITE 306  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

4400 HIGHWAY 20 EAST  
SUITE 306  
NICEVILLE, FL 32578

**New Mailing Address:**

FEI Number: 14-1843055

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARK A. VIOLETTE, P.A.  
42 BUSINESS CENTER DR  
SUITE 311  
MIRAMAR BEACH, FL 32550 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: JACKSON, NELDA  
Address: 268 OLDE POST ROAD  
City-St-Zip: NICEVILLE, FL 32578

Title: MGRM ( ) Delete  
Name: JACKSON, NEULON D  
Address: 268 OLDE POST ROAD  
City-St-Zip: NICEVILLE, FL 32578

**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: NEULON D JACKSON

MGRM

02/27/2007

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