


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90129 004 ***142.75

DOCUMENT # L02000034583 1. Entity Name NATIONAL BOOK SERVICE, LLC	
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Principal Place of Business 4610 HIDDEN RIVER ROAD SARSOTA, FL 34240	Mailing Address 4610 HIDDEN RIVER ROAD SARSOTA, FL 34240
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60021647



03242008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 45-0493944	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent GRANDBOUCHE, BRADLEY D 4610 HIDDEN RIVER ROAD SARSOTA, FL 34240

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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 <u><i>Bradley D. Grandbouche</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE <u><i>3/28/08</i></u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRANDBOUCHE, JANE BEST 4610 HIDDEN RIVER ROAD SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRANDBOUCHE, BRADLEY D 4610 HIDDEN RIVER ROAD SARASOTA, FL 34240
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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: <u><i>Jane Best Grandbouche</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date <u><i>3/28/08</i></u>	Daytime Phone # <u><i>941-322-8852</i></u>
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