

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 09, 2007 8:00 am
Secretary of State

08-09-2007 90036 001 ***150.00

DOCUMENT # L03000000394

1. Entity Name
NEXTECH, LLC



Principal Place of Business

**445 WEST DRIVE
SUITE 101
MELBOURNE, FL 32904**

Mailing Address

**445 WEST DRIVE
SUITE 101
MELBOURNE, FL 32904**

JU014170



07052007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

82-0578122

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HUMPHRIES, J. GREGORY
300 S. ORANGE AVE. SUITE 1000
ORLANDO, FL 32801**

**DO NOT WRITE
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 _____

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BULL, ROBERT A PRES
STREET ADDRESS	445 WEST DRIVE
CITY-ST-ZIP	MELBOURNE, FL 32935
TITLE	MGRM
NAME	ARES HOLDINGS LLC
STREET ADDRESS	445 WEST DRIVE
CITY-ST-ZIP	MELBOURNE, FL 32935
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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

Date

Daytime Phone #

7/9/07

321 727 2865