

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002795

Entity Name: NOLINCA ENTEPRISES LLC

FILED  
Feb 13, 2006  
Secretary of State

**Current Principal Place of Business:**

415 SYCAMORE STREET  
CELEBRATION, FL 34747

**New Principal Place of Business:**

4401 GREAT HARBOR LANE  
KISSIMMEE, FL 34746

**Current Mailing Address:**

415 SYCAMORE STREET  
CELEBRATION, FL 34747

**New Mailing Address:**

4401 GREAT HARBOR LANE  
KISSIMMEE, FL 34746

FEI Number: 30-0146321

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRASSO, CARINA  
415 SYCAMORE STREET  
CELEBRATION, FL 34747 US

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

MARTINEZ, MARISOL  
4401 GREAT HARBOR LANE  
KISSIMMEE, FL 34746 US

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: MARISOL MARTINEZ

02/13/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GRASSO, CARINA  
Address: 415 SYCAMORE STREET  
City-St-Zip: CELEBRATION, FL 34747

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MARTINEZ, MARISOL  
Address: 4401 GREAT HARBOR LANE  
City-St-Zip: KISSIMMEE, FL 34746

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: MARISOL MARTINEZ

MGRM

02/13/2006

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