

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000012456

Entity Name: NANETTE TURNER GST, L.L.C.

**FILED**  
**Oct 19, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

ARCADIA  
HWY 31  
ARCADIA, FL 34265

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 929  
HANOVER, NH 03755

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MCGINNESS, W. LEE  
1800 SECOND STREET, STE. 971  
SARASOTA, FL 34236 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: W. LEE MCGINNESS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STEVENSON, BAYNE  
Address: PO BOX 929  
City-St-Zip: HANOVER, NH 03755

Title: MGR ( ) Delete  
Name: STEVENSON, DAVID  
Address: 986 VT 15W  
City-St-Zip: HYDE PARK, VT 05655

**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: BAYNE STEVENSON

MGR

10/19/2006

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