

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022853

FILED
Jan 08, 2007
Secretary of State

Entity Name: NADA TRUST, LLC

Current Principal Place of Business:

101 NE 2ND ST.
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

101 NE 2ND ST.
OCALA, FL 34470

New Mailing Address:

FEI Number: 20-0214772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKS, DANIEL
421 SOUTH PINE AVE.
OCALA, FL 34474 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: ROBERSON, CODA III
Address: 101 NE 2ND ST.
City-St-Zip: Ocala, FL 34470

Title: MGRM () Delete
Name: POTTER, MARGARET A
Address: 101 NE 2ND STREET
City-St-Zip: Ocala, FL 34470

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: POTTER-LEVANE, MARGARET A
Address: 101 NE 2ND STREET
City-St-Zip: Ocala, FL 34470

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: MARGARET A. POTTER-LEVANE

MGRM

01/08/2007

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