

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026536

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: NUA BAILE, LLC

**Current Principal Place of Business:**

ONE AVE MARIA DRIVE  
ANN ARBOR, MI 48105

**New Principal Place of Business:**

**Current Mailing Address:**

ATTN: GEORGE FORREST  
P.O. BOX 373  
ANN ARBOR, MI 48106

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

NAPLES-LAWDOCK, INC.  
1395 PANTHER LANE  
SUITE 300  
NAPLES, FL 34109 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: MGR ( ) Delete  
Name: MONAGHAN, THOMAS S  
Address: ONE AVE MARIA DRIVE  
City-St-Zip: ANN ARBOR, MI 48105

Title: MGR ( ) Delete  
Name: RONEY, PAUL  
Address: ONE AVE MARIA DRIVE  
City-St-Zip: ANN ARBOR, MI 48105

**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 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: LEN SANCHEZ

SR A

04/30/2008

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