2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# L04000003508

Entity Name: NOTTINGHAMSHIRE INVESTMENT, LLC

Current Principal Place of Business:

1291 GRAND ISLE COURT
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

2001 CHURCHILL STREET
% NANCY J KAPP
CHICAGO, IL 60647 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

BOURGEAU, DAVID C
2375 TAMIAMI TRAIL NORTH
SUITE 308
NAPLES, FL 34103 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: KAPP, NANCY J
Address: 2001 CHURCHHILL STREET
City-St-Zip: CHICAGO, IL 60647 US

Title: MEMB ( ) Delete
Name: KAPP, CHARLES P
Address: 116 W. 59TH ST
City-St-Zip: BURR RIDGE, IL 60521

Title: MEMB ( ) Delete
Name: KAPP, MICHELE M
Address: 116 W. 59TH ST
City-St-Zip: BURR RIDGE, IL 60521

ADDITIONS/CHANGES:

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

Title: MEMB (X) Change ( ) Addition
Name: KAPP, CHARLES P
Address: 14 NORTH MADISON ST
City-St-Zip: LA GRANGE, IL 60525

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: NANCY J. KAPP MGR 01/19/2009

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