2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2006
Secretary of State

DOCUMENT# L04000006005

Entity Name: NABCO, LLC

Current Principal Place of Business:

11330 ARBORSIDE BEND WAY
WINDERMERE, FL 34786

New Principal Place of Business:

9319 PECKY CYPRESS WAY
ORLANDO, FL 32836

Current Mailing Address:

11330 ARBORSIDE BEND WAY
WINDERMERE, FL 34786

New Mailing Address:

9319 PECKY CYPRESS WAY
ORLANDO, FL 32836

FEI Number: 20-0663709 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIKES, RONALD W ESQ
111 N ORANGE AVE, STE 1200
ORLANDO, FL 32801 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: NABAVI, DAVID
Address: 11330N ARBORSIDE BEND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM ( ) Delete
Name: NABRUI, THERESA
Address: 11330 ARBORSIDE BEND WAY
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: NABAVI, DAVID
Address: 9319 PECKY CYPRESS WAY
City-St-Zip: ORLANDO, FL 32836

Title: MGRM (X) Change ( ) Addition
Name: NABAVI, THERESA
Address: 9319 PECKY CYPRESS WAY
City-St-Zip: ORLANDO, FL 32836

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: THERESA NABAVI MGRM 03/14/2006

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