

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045310

Entity Name: NOSDOM LLC

FILED  
Aug 31, 2005  
Secretary of State

**Current Principal Place of Business:**

362 GULF BREEZE PKWY  
141  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

362 GULF BREEZE PKWY  
141  
GULF BREEZE, FL 32561

**New Mailing Address:**

FEI Number: 20-1209782      FEI Number Applied For ( )      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:**

SMITH, CHRISTOPHER R  
362 GULF BREEZE PKWY  
141  
GULF BREEZE, FL 32561 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: PRES ( ) Change (X) Addition  
Name: SMITH, CHRISTOPHER R  
Address: 8069 BAYWIND CIR  
City-St-Zip: PENSACOLA, FL 32514

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTOPHER RAY SMITH

PRES

08/31/2005

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