2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

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Entity Name: NATHAN ALLEN SHUTTS, LLC

Current Principal Place of Business:

2411 ACADEMY C EAST
8-104
KISSIMMEE, FL 34744 US

New Principal Place of Business:

752 PETE'S LANE
DAVENPORT, FL 33837 US

Current Mailing Address:

233 GRAND RESERVE DRIVE
DAVENPORT, FL 33837 US

New Mailing Address:

FEI Number: 20-1353718 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SHUTTS, NATHAN A
2411 ACADEMY C EAST
8-104
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

SHUTTS, NATHAN A
600 MISSISSIPPI AVENUE
ST. CLOUD, FL 34769 US

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: NATHAN A. SHUTTS 01/03/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SHUTTS, NATHAN A
Address: 2411 ACADEMY C EAST 8-104
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGRM (X) Delete
Name: KENNEDY, CRYSTAL
Address: 2411 ACADEMY C EAST 8-104
City-St-Zip: KISSIMMEE, FL 34744 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SHUTTS, NATHAN A
Address: 600 MISSISSIPPI
City-St-Zip: ST. CLOUD, FL 34769 US

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

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: NATHAN A. SHUTTS MGRM 01/03/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date