

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052542

FILED  
Jan 04, 2008  
Secretary of State

**Entity Name:** NICHOLLS INVESTMENT PROPERTIES, LLC

**Current Principal Place of Business:**

C/O JOHN NICHOLLS  
20248 N.E. 34TH COURT  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOHN NICHOLLS  
20248 N.E. 34TH COURT  
AVENTURA, FL 33180

**New Mailing Address:**

**FEI Number:** 20-1331636

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASCIO, CARL A ESQ.  
525 N.E. 3RD AVENUE, SUITE 102  
DELRAY BEACH, FL 33444 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: CASCIO, CARL A  
Address: 525 N.E. 3RD AVENUE, SUITE 102  
City-St-Zip: DELRAY BEACH, FL 33180

Title: MGRM ( ) Delete  
Name: NICHOLLS, JOHN  
Address: 20248 N.E. 34TH COURT  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CASCIO, CARL A  
Address: 525 N.E. 3RD AVENUE, SUITE 102  
City-St-Zip: DELRAY BEACH, FL 33444

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:** JOHN NICHOLLS

MGRM

01/04/2008

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