

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053876

Entity Name: NORTSHORE ISLANDS ESTATES, LLC

FILED  
Jan 27, 2007  
Secretary of State

## Current Principal Place of Business:

1892 WITCHTREE ACRES  
TALLAHASSEE, FL 32312

## New Principal Place of Business:

215 WEST COLLEGE AVE.  
504  
TALLAHASSEE, FL 32301

## Current Mailing Address:

1892 WITCHTREE ACRES  
TALLAHASSEE, FL 32312

## New Mailing Address:

P.O. BOX 906  
TALLAHASSEE, FL 32302

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BINGHAM, FRASIER O  
1892 WITCHTREE ACRES  
TALLAHASSEE, FL 32312 US

## Name and Address of New Registered Agent:

BINGHAM, FRASIER O  
215 WEST COLLEGE AVE  
SUITE 504  
TALLAHASSEE, FL 32301 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: FRASIER O. BINGHAM

01/27/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BINGHAM, FRASIER O  
Address: 1892 WITCHTREE ACRES  
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM ( ) Delete  
Name: HANSMAN, ROBERT H  
Address: 1270 WILLOW PARK WAY  
City-St-Zip: CUMMING, GA 30041

Title: MGRM ( ) Delete  
Name: HANSMAN, BARBARA B  
Address: 1279 WILLOW PARK WAY  
City-St-Zip: CUMMING, GA 30041

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BINGHAM, FRASIER O  
Address: P. O. BOX 906  
City-St-Zip: TALLAHASSEE, FL 32302

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

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: FRASIER O. BINGHAM

MGRM

01/27/2007

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