



**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jun 06, 2005 8:00 am**  
**Secretary of State**

04-28-2005 90028 004 \*\*\*\*50.00

DOCUMENT # L04000060558			
1. Entity Name NASSAUVILLE, L.L.C.			
Principal Place of Business 37 LAUREL OAK AMELIA ISLAND, FL 32034		Mailing Address 37 LAUREL OAK AMELIA ISLAND, FL 32034	
2. Principal Place of Business 8 Sound Point Place		3. Mailing Address 8 Sound Point Place	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Amelia Island, FL		City & State Amelia Island, FL	
Zip 32034		Country USA	
4. FEI Number 30-0270587		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent KELLY, TIMOTHY P 1016 LASALLE STREET SECOND FLOOR JACKSONVILLE, FL 32207		7. Name and Address of New Registered Agent Name Robert W. Selton, III Street Address (P.O. Box Number is Not Acceptable) 8 Sound Point Place City Amelia Island FL Zip Code 32034	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SELTON, ROBERT W III 37 LAUREL OAK AMELIA ISLAND, FL 32034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Selton, Robert W III 8 Sound Point Place Amelia Island, FL 32034 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SELTON, CARRIE A 37 LAUREL OAK AMELIA ISLAND, FL 32034 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Selton, Carrie A 8 Sound Point Place Amelia Island, FL 32034 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 		Date: 4/24/05 (904) 358-1206	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF BOARD MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	

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04212005 Chg-LLC CR2E083 (10/03)