

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061955

FILED
Feb 16, 2009
Secretary of State

Entity Name: NICHOLS STRASSER INVESTMENTS, LLC

Current Principal Place of Business:

1042 N. US HWY 1
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1042 N. US HWY 1
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 20-1553146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRASSER, CHARLES L
1042 N US HWY 1
ORMOND BEACH, FL 32174 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: STRASSER, CHARLES L
Address: 1042 NORTH UNITED STATES HIGHWAY ONE
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: NICHOLS, MICHAEL R
Address: 3544 SHORELINE CIRCLE
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STRASSER, CHARLES L
Address: 1042 NORTH UNITED STATES HIGHWAY ONE
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR (X) Change () Addition
Name: NICHOLS, MICHAEL R
Address: 3544 SHORELINE CIRCLE
City-St-Zip: PALM HARBOR, FL 34684

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: CHARLES L.STRASSER

MGR

02/16/2009

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