2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000085768

1. Entity Name NABOATCON LLC



FILED Jan 28, 2008 08:00 AN Secretary of State

Principal Place of Business

12363 COLLIER'S RESERVE DR NAPLES, FL 34110

Mailing Address

12363 COLLIER'S RESERVE DR NAPLES, FL 34110



01242008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3790032 Applied For Not Applicab

5. Certificate of Status Desired

Samuel & will be the

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MCNAGHTEN, ROBERT H 7655 PEBBLE CREEK CIRCLE, UNIT 104 NAPLES, FL 34108

DO NOT WRITE IN THIS SPACE

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.

Signature, typed or printed name of registered event and title if explicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BOREL, ROBERT J 12363 COLLIER'S RESERVE DR NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCNAGHTEN, ROBERT H 7655 PEBBLE CREEK CIRCLE NAPLES, FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OVERMEYER, EDWIN 10701 GULFSHORE DR. UNIT 1201 NAPLES, FL 34108
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02/01/08⁺80029-001 138.75

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I hereby certify that the Information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.